

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Allstate Insurance Company PAC

ADDRESS (number and street)

2775 Sanders Road Suite A2W

☐ Check if different than previously reported. (ACC)

Northbrook

IL

60062

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00040253

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☒ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

12

01

2013

12

31

2013

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Mario Rizzo

Signature of Treasurer

Mario Rizzo

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

01

22

2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Allstate Insurance Company PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
12 / 01 / 2013 To: M M / D D / Y Y Y Y Y Y  
12 / 31 / 2013

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2013</span>		<span style="border: 1px solid black; padding: 2px;">50461.20</span>
(b) Cash on Hand at Beginning of Reporting Period.....	<span style="border: 1px solid black; padding: 2px;">15547.82</span>	
(c) Total Receipts (from Line 19) .....	<span style="border: 1px solid black; padding: 2px;">20059.64</span>	<span style="border: 1px solid black; padding: 2px;">291873.14</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<span style="border: 1px solid black; padding: 2px;">35607.46</span>	<span style="border: 1px solid black; padding: 2px;">342334.34</span>
7. Total Disbursements (from Line 31) .....	<span style="border: 1px solid black; padding: 2px;">17019.94</span>	<span style="border: 1px solid black; padding: 2px;">323746.82</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<span style="border: 1px solid black; padding: 2px;">18587.52</span>	<span style="border: 1px solid black; padding: 2px;">18587.52</span>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# DETAILED SUMMARY PAGE

## of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Allstate Insurance Company PAC

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y  
 12 / 01 / 2013

To:

 M M / D D / Y Y Y Y Y  
 12 / 31 / 2013
**I. Receipts**
**COLUMN A**  
**Total This Period**
**COLUMN B**  
**Calendar Year-to-Date**

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

19906.22

226213.32

(ii) Unitemized .....

153.42

65159.82

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

20059.64

291373.14

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) .....

20059.64

291373.14

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

500.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3) .....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

20059.64

291873.14

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) .....

20059.64

291873.14

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	107.51	1266.31
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	107.51	1266.31
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	8000.00	208000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	47.43	320.51
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	47.43	320.51
29. Other Disbursements .....	8865.00	114160.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	17019.94	323746.82
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	17019.94	323746.82

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	20059.64	291373.14
34. Total Contribution Refunds (from Line 28(d)) .....	47.43	320.51
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	20012.21	291052.63
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	107.51	1266.31
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	500.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	107.51	766.31

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 213

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

**A. REBECCA A ABEL**

Mailing Address 657 CORAL COURT

City State Zip Code  
 LINDENHURST IL 60046

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims Senior Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

578.07

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

Transaction ID : A2013-4523871

Amount of Each Receipt this Period

23.75

Full Name (Last, First, Middle Initial)

**B. REBECCA A ABEL**

Mailing Address 657 CORAL COURT

City State Zip Code  
 LINDENHURST IL 60046

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims Senior Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

601.82

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

Transaction ID : A2013-4572595

Amount of Each Receipt this Period

23.75

Full Name (Last, First, Middle Initial)

**C. ERNEST D ADAMS**

Mailing Address P O Box 105

City State Zip Code  
 Grayslake IL 60030

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Leader-Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.88

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

Transaction ID : A2013-4523691

Amount of Each Receipt this Period

20.88

SUBTOTAL of Receipts This Page (optional)..... ►

68.38

TOTAL This Period (last page this line number only)..... ►

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB  
.

Form/Schedule: SA11AI

Transaction ID :

Please note that the PAC is aware that we follow an alternate method of itemizing payroll receipts rather than the suggested manner of disclosing a single total for the reporting period along with the amount deducted per pay period. Because the amounts collected per pay period may change often during the time covered by a single report, we find that reporting individual deductions separately more accurately discloses how the receipts are collected.

Form/Schedule:

Transaction ID:

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 213

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. ERNEST D ADAMS

Mailing Address P O Box 105

City  
Grayslake

State Zip Code  
IL 60030

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
ATO-Leader-Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

541.76

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

Transaction ID : A2013-4572415

Amount of Each Receipt this Period

20.88

Full Name (Last, First, Middle Initial)

B. MICHAEL W AGAR

Mailing Address 200 W MILL VALLEY DR

City  
COLLEYVILLE

State Zip Code  
TX 76034

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
ATO-Service Manager-Sr Te

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.75

Date of Receipt

M M / D D / Y Y Y Y Y  
12 13 2013

Transaction ID : A2013-4523805

Amount of Each Receipt this Period

16.35

Full Name (Last, First, Middle Initial)

C. MICHAEL W AGAR

Mailing Address 200 W MILL VALLEY DR

City  
COLLEYVILLE

State Zip Code  
TX 76034

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
ATO-Service Manager-Sr Te

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.10

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

Transaction ID : A2013-4572529

Amount of Each Receipt this Period

16.35

SUBTOTAL of Receipts This Page (optional)..... ►

53.58

TOTAL This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 213

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JOHN P BADER

Mailing Address 438 MITCHELL DRIVE

City

GRAYS LAKE

State

IL

Zip Code

60030

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ATO-Delivery &amp; Risk M

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2028.75

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

Transaction ID : A2013-4523621

Amount of Each Receipt this Period

81.15

Full Name (Last, First, Middle Initial)

B. JOHN P BADER

Mailing Address 438 MITCHELL DRIVE

City

GRAYS LAKE

State

IL

Zip Code

60030

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ATO-Delivery &amp; Risk M

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2109.90

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2013

Transaction ID : A2013-4572345

Amount of Each Receipt this Period

81.15

Full Name (Last, First, Middle Initial)

C. DENIS BAILEY

Mailing Address 8316 E. Tailfeather Dr

City

Scottsdale

State

AZ

Zip Code

85255

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

566.23

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

Transaction ID : A2013-4523622

Amount of Each Receipt this Period

22.75

SUBTOTAL of Receipts This Page (optional)..... ►

185.05

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 213

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

**A. DENIS BAILEY**

Mailing Address 8316 E. Tailfeather Dr

City State Zip Code  
 Scottsdale AZ 85255

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

588.98

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

Transaction ID : A2013-4572346

Amount of Each Receipt this Period

22.75

Full Name (Last, First, Middle Initial)

**B. ALEXANDRA BALATSOUKAS**

Mailing Address 1225 W. Morse Unit 508

City State Zip Code  
 Chicago IL 60626

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims Senior Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

775.59

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

Transaction ID : A2013-4523808

Amount of Each Receipt this Period

31.20

Full Name (Last, First, Middle Initial)

**C. ALEXANDRA BALATSOUKAS**

Mailing Address 1225 W. Morse Unit 508

City State Zip Code  
 Chicago IL 60626

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims Senior Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

806.79

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

Transaction ID : A2013-4572532

Amount of Each Receipt this Period

31.20

SUBTOTAL of Receipts This Page (optional)..... ►

85.15

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 213

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. GREGORY P BALDWIN

Mailing Address 2 Saddle Ridge Ct.

City

Hawthorn Woods

State

IL

Zip Code

60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1021.05

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

Transaction ID : A2013-4523798

Amount of Each Receipt this Period

41.04

Full Name (Last, First, Middle Initial)

B. GREGORY P BALDWIN

Mailing Address 2 Saddle Ridge Ct.

City

Hawthorn Woods

State

IL

Zip Code

60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1062.09

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2013

Transaction ID : A2013-4572522

Amount of Each Receipt this Period

41.04

Full Name (Last, First, Middle Initial)

C. WILLIAM P BALLINGER

Mailing Address 25 Blue Heron Way

City

Skillman

State

NJ

Zip Code

08558

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-PC-Agency Contact Cen

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

929.71

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

Transaction ID : A2013-4523665

Amount of Each Receipt this Period

37.32

SUBTOTAL of Receipts This Page (optional)..... ►

119.40

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 213

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

**A. WILLIAM P BALLINGER**

Mailing Address 25 Blue Heron Way

City State Zip Code  
Skillman NJ 08558

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-PC-Agency Contact Cen

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

967.03

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

Transaction ID : A2013-4572389

Amount of Each Receipt this Period

37.32

Full Name (Last, First, Middle Initial)

**B. PHILLIP W BANET**

Mailing Address 4589 JADE LANE

City State Zip Code  
HOFFMAN ESTATES IL 60192

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Actuary

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

975.89

Date of Receipt

M M / D D / Y Y Y Y Y  
12 13 2013

Transaction ID : A2013-4523696

Amount of Each Receipt this Period

39.14

Full Name (Last, First, Middle Initial)

**C. PHILLIP W BANET**

Mailing Address 4589 JADE LANE

City State Zip Code  
HOFFMAN ESTATES IL 60192

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Actuary

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1018.72

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

Transaction ID : A2013-4572420

Amount of Each Receipt this Period

42.83

SUBTOTAL of Receipts This Page (optional)..... ►

119.29

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. ROBERT K BECKER**

Mailing Address 5 Greensview Lane

City State Zip Code  
 Scotch Plains NJ 07076

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
 Allstate Insurance Company SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

731.92

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

**Transaction ID : A2013-4523633**

Amount of Each Receipt this Period

29.43

Full Name (Last, First, Middle Initial)

**B. ROBERT K BECKER**

Mailing Address 5 Greensview Lane

City State Zip Code  
 Scotch Plains NJ 07076

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
 Allstate Insurance Company SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

761.35

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

**Transaction ID : A2013-4572357**

Amount of Each Receipt this Period

29.43

Full Name (Last, First, Middle Initial)

**C. DIANE BELLAS**

Mailing Address 1402 N. Illinois Avenue

City State Zip Code  
 Arlington Heights IL 60004

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
 Allstate Insurance Company Accounting Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

558.13

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

**Transaction ID : A2013-4523727**

Amount of Each Receipt this Period

22.41

**SUBTOTAL** of Receipts This Page (optional)..... ►

81.27

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. DIANE BELLAS**

Mailing Address 1402 N. Illinois Avenue

City State Zip Code  
Arlington Heights IL 60004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Accounting Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

580.54

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

**Transaction ID : A2013-4572451**

Amount of Each Receipt this Period

22.41

Full Name (Last, First, Middle Initial)

## **B. WALTER A BERKOWICZ**

Mailing Address 405 GATESHEAD DRIVE

City State Zip Code  
NAPERVILLE IL 60565

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

AFT-Architect-Expert

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

899.50

Date of Receipt

M M / D D / Y Y Y Y Y  
12 13 2013

**Transaction ID : A2013-4523769**

Amount of Each Receipt this Period

36.23

Full Name (Last, First, Middle Initial)

## **C. WALTER A BERKOWICZ**

Mailing Address 405 GATESHEAD DRIVE

City State Zip Code  
NAPERVILLE IL 60565

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

AFT-Architect-Expert

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

935.73

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

**Transaction ID : A2013-4572493**

Amount of Each Receipt this Period

36.23

**SUBTOTAL** of Receipts This Page (optional)..... ►

94.87

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. EDWARD A BIEMER**

Mailing Address 807 Greenwood Ave.

City State Zip Code  
GLENCOE IL 60022

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-PRD-Product Line Mana

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1057.72

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523646**

Amount of Each Receipt this Period

42.46

Full Name (Last, First, Middle Initial)

## **B. EDWARD A BIEMER**

Mailing Address 807 Greenwood Ave.

City State Zip Code  
GLENCOE IL 60022

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-PRD-Product Line Mana

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.18

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2013

**Transaction ID : A2013-4572370**

Amount of Each Receipt this Period

42.46

Full Name (Last, First, Middle Initial)

## **C. ROBERT W BIRMAN**

Mailing Address 7533 WHITLOCK PLACE

City State Zip Code  
LINCOLN NE 68516

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Operations Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.18

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523773**

Amount of Each Receipt this Period

19.09

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

104.01

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

**A. ROBERT W BIRMAN**

Mailing Address 7533 WHITLOCK PLACE

City State Zip Code  
 LINCOLN NE 68516

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Operations Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

511.45

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

Transaction ID : A2013-4572497

Amount of Each Receipt this Period

36.27

Full Name (Last, First, Middle Initial)

**B. ROBERT L BLOCK**

Mailing Address 398 Brookmont Lane

City State Zip Code  
 North Barrington IL 60010

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-FSS-Investor Relation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1673.55

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

Transaction ID : A2013-4523825

Amount of Each Receipt this Period

67.12

Full Name (Last, First, Middle Initial)

**C. ROBERT L BLOCK**

Mailing Address 398 Brookmont Lane

City State Zip Code  
 North Barrington IL 60010

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-FSS-Investor Relation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1740.67

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

Transaction ID : A2013-4572549

Amount of Each Receipt this Period

67.12

SUBTOTAL of Receipts This Page (optional)..... ►

170.51

TOTAL This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. SUSAN F BOMBECK**

Mailing Address 506 Blackhawk Ct

City State Zip Code  
Loomis CA 95650

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Technical Claim Process S

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

388.46

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523872**

Amount of Each Receipt this Period

15.58

Full Name (Last, First, Middle Initial)

**B. SUSAN F BOMBECK**

Mailing Address 506 Blackhawk Ct

City State Zip Code  
Loomis CA 95650

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Technical Claim Process S

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

404.04

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2013

**Transaction ID : A2013-4572596**

Amount of Each Receipt this Period

15.58

Full Name (Last, First, Middle Initial)

**C. DOUGLAS L BORG**

Mailing Address 2160 Red Setter Road

City State Zip Code  
Rocklin CA 95765

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Financial Sales Consultan

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

835.76

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523868**

Amount of Each Receipt this Period

33.49

**SUBTOTAL** of Receipts This Page (optional)..... ►

64.65

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. DOUGLAS L BORG**

Mailing Address 2160 Red Setter Road

City State Zip Code  
Rocklin CA 95765

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Financial Sales Consultan

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

869.25

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

**Transaction ID : A2013-4572592**

Amount of Each Receipt this Period

33.49

Full Name (Last, First, Middle Initial)

## **B. WILLIAM B BORST**

Mailing Address 827 N. HADDOW AVENUE

City State Zip Code  
ARLINGTON HTS IL 60004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-EB-Head of Stratetic G

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

671.14

Date of Receipt

M M / D D / Y Y Y Y Y  
12 13 2013

**Transaction ID : A2013-4523726**

Amount of Each Receipt this Period

30.73

Full Name (Last, First, Middle Initial)

## **C. WILLIAM B BORST**

Mailing Address 827 N. HADDOW AVENUE

City State Zip Code  
ARLINGTON HTS IL 60004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-EB-Head of Stratetic G

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

701.87

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

**Transaction ID : A2013-4572450**

Amount of Each Receipt this Period

30.73

**SUBTOTAL** of Receipts This Page (optional)..... ►

94.95

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

**A. GWEN K BOWN**

Mailing Address 5220 SAWGRASS DR.

City State Zip Code  
 LINCOLN NE 68526

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

AFT-Manager-Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.94

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

Transaction ID : A2013-4523847

Amount of Each Receipt this Period

16.74

Full Name (Last, First, Middle Initial)

**B. GWEN K BOWN**

Mailing Address 5220 SAWGRASS DR.

City State Zip Code  
 LINCOLN NE 68526

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

AFT-Manager-Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

432.68

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

Transaction ID : A2013-4572571

Amount of Each Receipt this Period

16.74

Full Name (Last, First, Middle Initial)

**C. LONDON B BRADLEY**

Mailing Address 6350 S Langdale Way

City State Zip Code  
 Aurora CO 80016

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Regional Sales Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

926.66

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

Transaction ID : A2013-4523853

Amount of Each Receipt this Period

37.25

SUBTOTAL of Receipts This Page (optional)..... ►

70.73

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. LONDON B BRADLEY**

Mailing Address 6350 S Langdale Way

City State Zip Code  
Aurora CO 80016

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Regional Sales Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

963.91

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

**Transaction ID : A2013-4572577**

Amount of Each Receipt this Period

37.25

Full Name (Last, First, Middle Initial)

## **B. KENNETH A BRANCH**

Mailing Address 28955 NIBLICK KNOLL CT.

City State Zip Code  
IVANHOE IL 60060

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
VP-AHA-Independent Channe

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.26

Date of Receipt

M M / D D / Y Y Y Y Y  
12 13 2013

**Transaction ID : A2013-4523832**

Amount of Each Receipt this Period

22.87

Full Name (Last, First, Middle Initial)

## **C. KENNETH A BRANCH**

Mailing Address 28955 NIBLICK KNOLL CT.

City State Zip Code  
IVANHOE IL 60060

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
VP-AHA-Independent Channe

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

593.13

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

**Transaction ID : A2013-4572556**

Amount of Each Receipt this Period

22.87

**SUBTOTAL** of Receipts This Page (optional)..... ►

82.99

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. DUDLEY R BRIGHT**

Mailing Address 18135 W MEANDER DR

City State Zip Code  
 GRAYSLAKE IL 60030

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Finance Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.05

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

**Transaction ID : A2013-4523658**

Amount of Each Receipt this Period

20.84

Full Name (Last, First, Middle Initial)

**B. DUDLEY R BRIGHT**

Mailing Address 18135 W MEANDER DR

City State Zip Code  
 GRAYSLAKE IL 60030

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Finance Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.89

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

**Transaction ID : A2013-4572382**

Amount of Each Receipt this Period

20.84

Full Name (Last, First, Middle Initial)

**C. LORRIE K BROUSE**

Mailing Address 223 POLK PLACE DRIVE

City State Zip Code  
 FRANKLIN TN 37064

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

982.03

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

**Transaction ID : A2013-4523674**

Amount of Each Receipt this Period

39.42

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

81.10

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. LORRIE K BROUSE**

Mailing Address 223 POLK PLACE DRIVE

City State Zip Code  
 FRANKLIN TN 37064

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1021.45

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

**Transaction ID : A2013-4572398**

Amount of Each Receipt this Period

39.42

Full Name (Last, First, Middle Initial)

## **B. PAMELA S BROWN**

Mailing Address 5886 TEAL LANE

City State Zip Code  
 LONG GROVE IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

513.35

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

**Transaction ID : A2013-4523801**

Amount of Each Receipt this Period

20.59

Full Name (Last, First, Middle Initial)

## **C. PAMELA S BROWN**

Mailing Address 5886 TEAL LANE

City State Zip Code  
 LONG GROVE IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

533.94

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

**Transaction ID : A2013-4572525**

Amount of Each Receipt this Period

20.59

**SUBTOTAL** of Receipts This Page (optional)..... ►

80.60

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. ANNE MARIE L BRUNNER**

Mailing Address 2514 SOUTH WESLEY AVE

City State Zip Code  
BERWYN IL 60402

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

983.53

Date of Receipt

M M / D D / Y Y Y Y Y  
12 13 2013

**Transaction ID : A2013-4523731**

Amount of Each Receipt this Period

39.48

Full Name (Last, First, Middle Initial)

**B. ANNE MARIE L BRUNNER**

Mailing Address 2514 SOUTH WESLEY AVE

City State Zip Code  
BERWYN IL 60402

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1023.01

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

**Transaction ID : A2013-4572455**

Amount of Each Receipt this Period

39.48

Full Name (Last, First, Middle Initial)

**C. JOHN E BUCHANAN**

Mailing Address 26 W. 690 LINDSEY AVE.

City State Zip Code  
WINFIELD IL 60190

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

432.28

Date of Receipt

M M / D D / Y Y Y Y Y  
12 13 2013

**Transaction ID : A2013-4523791**

Amount of Each Receipt this Period

17.39

**SUBTOTAL** of Receipts This Page (optional)..... ►

96.35

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. JOHN E BUCHANAN**

Mailing Address 26 W. 690 LINDSEY AVE.

City  
WINFIELD

State Zip Code  
IL 60190

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

449.67

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

**Transaction ID : A2013-4572515**

Amount of Each Receipt this Period

17.39

Full Name (Last, First, Middle Initial)

**B. CHERI M BUCKLEY**

Mailing Address 249 S. OLD CREEK RD

City  
VERNON HILLS

State Zip Code  
IL 60061

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.17

Date of Receipt

M M / D D / Y Y Y Y Y  
12 13 2013

**Transaction ID : A2013-4523796**

Amount of Each Receipt this Period

13.08

Full Name (Last, First, Middle Initial)

**C. CHERI M BUCKLEY**

Mailing Address 249 S. OLD CREEK RD

City  
VERNON HILLS

State Zip Code  
IL 60061

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.25

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

**Transaction ID : A2013-4572520**

Amount of Each Receipt this Period

13.08

**SUBTOTAL** of Receipts This Page (optional)..... ►

43.55

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. MARK L BUKOWY**

Mailing Address 1077 Devon Drive

City State Zip Code  
Antioch IL 60002

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
ATO-Manager-Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

411.51

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523729**

Amount of Each Receipt this Period

16.52

Full Name (Last, First, Middle Initial)

**B. MARK L BUKOWY**

Mailing Address 1077 Devon Drive

City State Zip Code  
Antioch IL 60002

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
ATO-Manager-Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

428.03

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2013

**Transaction ID : A2013-4572453**

Amount of Each Receipt this Period

16.52

Full Name (Last, First, Middle Initial)

**C. TYRONE A BURNO**

Mailing Address 868 CHARLTON ROAD

City State Zip Code  
LAKE VILLA IL 60046

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
HR-Workforce Relations-Di

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.27

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523654**

Amount of Each Receipt this Period

16.87

**SUBTOTAL** of Receipts This Page (optional)..... ►

49.91

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. TYRONE A BURNO**

Mailing Address 868 CHARLTON ROAD

City State Zip Code  
 LAKE VILLA IL 60046

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

HR-Workforce Relations-Di

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

437.14

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

**Transaction ID : A2013-4572378**

Amount of Each Receipt this Period

16.87

Full Name (Last, First, Middle Initial)

## **B. GREGORY C BURNS**

Mailing Address 2000 N. BROADMOOR LANE

City State Zip Code  
 VERNON HILLS IL 60061

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-HR-Client Partnership

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1069.08

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

**Transaction ID : A2013-4523650**

Amount of Each Receipt this Period

56.54

Full Name (Last, First, Middle Initial)

## **C. GREGORY C BURNS**

Mailing Address 2000 N. BROADMOOR LANE

City State Zip Code  
 VERNON HILLS IL 60061

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-HR-Client Partnership

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1125.62

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

**Transaction ID : A2013-4572374**

Amount of Each Receipt this Period

56.54

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

129.95

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

**A. ALICE M BYRNE**

Mailing Address 4121 109TH STREET

City State Zip Code  
 PLEASANT PRAIRI WI 53158

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2196.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 12 13 2013

Transaction ID : A2013-4523822

Amount of Each Receipt this Period

88.29

Full Name (Last, First, Middle Initial)

**B. ALICE M BYRNE**

Mailing Address 4121 109TH STREET

City State Zip Code  
 PLEASANT PRAIRI WI 53158

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2284.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 12 27 2013

Transaction ID : A2013-4572546

Amount of Each Receipt this Period

88.29

Full Name (Last, First, Middle Initial)

**C. Alfredo M Cantoral**

Mailing Address 340 W Superior St

City State Zip Code  
 Chicago IL 60654

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

638.83

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 12 13 2013

Transaction ID : A2013-4523899

Amount of Each Receipt this Period

25.71

SUBTOTAL of Receipts This Page (optional)..... ►

202.29

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Alfredo M Cantoral

Mailing Address 340 W Superior St

City

Chicago

State

IL

Zip Code

60654

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

664.54

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2013

Transaction ID : A2013-4572623

Amount of Each Receipt this Period

25.71

Full Name (Last, First, Middle Initial)

B. VIRGINIA O CHIAPPETTA

Mailing Address 165 ARLINGTON AVE

City

ELMHURST

State

IL

Zip Code

60126

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Communications-Manage

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

511.50

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

Transaction ID : A2013-4523778

Amount of Each Receipt this Period

20.46

Full Name (Last, First, Middle Initial)

C. VIRGINIA O CHIAPPETTA

Mailing Address 165 ARLINGTON AVE

City

ELMHURST

State

IL

Zip Code

60126

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Communications-Manage

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

531.96

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2013

Transaction ID : A2013-4572502

Amount of Each Receipt this Period

20.46

SUBTOTAL of Receipts This Page (optional)..... ►

66.63

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. BRIAN L CLARK**

Mailing Address 257 Lake Circle

City  
MADISON

State Zip Code  
MS 39110

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Finance Senior Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

439.94

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523831**

Amount of Each Receipt this Period

18.49

Full Name (Last, First, Middle Initial)

**B. BRIAN L CLARK**

Mailing Address 257 Lake Circle

City  
MADISON

State Zip Code  
MS 39110

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Finance Senior Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.43

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2013

**Transaction ID : A2013-4572555**

Amount of Each Receipt this Period

18.49

Full Name (Last, First, Middle Initial)

**C. EDWARD T CLARK**

Mailing Address 2907 GLENARYE DR

City  
LINDENHURST

State Zip Code  
IL 60046

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Prod Ops State Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

712.73

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523783**

Amount of Each Receipt this Period

28.61

**SUBTOTAL** of Receipts This Page (optional)..... ►

65.59

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

**A. EDWARD T CLARK**

Mailing Address 2907 GLENARYE DR

City  
LINDENHURSTState Zip Code  
IL 60046FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Prod Ops State Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

741.34

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2013

Transaction ID : A2013-4572507

Amount of Each Receipt this Period

28.61

Full Name (Last, First, Middle Initial)

**B. CHRISTOPHER W CLAY**

Mailing Address 9330 Malheur Way

City  
ELK GROVEState Zip Code  
CA 95758FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

882.63

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

Transaction ID : A2013-4523885

Amount of Each Receipt this Period

35.64

Full Name (Last, First, Middle Initial)

**C. CHRISTOPHER W CLAY**

Mailing Address 9330 Malheur Way

City  
ELK GROVEState Zip Code  
CA 95758FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

971.72

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2013

Transaction ID : A2013-4572609

Amount of Each Receipt this Period

89.09

SUBTOTAL of Receipts This Page (optional)..... ►

153.34

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. MARK P CLOGHESSY**

Mailing Address 4343 LAWN AVE

City State Zip Code  
WESTERN SPRINGS IL 60558

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
SMD-INV-International

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

960.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523697**

Amount of Each Receipt this Period

38.40

Full Name (Last, First, Middle Initial)

## **B. MARK P CLOGHESSY**

Mailing Address 4343 LAWN AVE

City State Zip Code  
WESTERN SPRINGS IL 60558

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
SMD-INV-International

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

998.40

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2013

**Transaction ID : A2013-4572421**

Amount of Each Receipt this Period

38.40

Full Name (Last, First, Middle Initial)

## **C. DEBORAH L CLOUSER**

Mailing Address 4667 TAMWORTH DR

City State Zip Code  
PALM HARBOR FL 34685

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Marketing Regional Sr Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.94

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523781**

Amount of Each Receipt this Period

32.18

**SUBTOTAL** of Receipts This Page (optional)..... ►

108.98

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. DEBORAH L CLOUSER**

Mailing Address 4667 TAMWORTH DR

City State Zip Code  
 PALM HARBOR FL 34685

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Marketing Regional Sr Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.12

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

**Transaction ID : A2013-4572505**

Amount of Each Receipt this Period

32.18

Full Name (Last, First, Middle Initial)

**B. LISA D COCHRANE**

Mailing Address 270 FAIRVIEW AVENUE

City State Zip Code  
 WINNETKA IL 60093

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-MRK-Integrated Mrktng

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

949.87

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

**Transaction ID : A2013-4523753**

Amount of Each Receipt this Period

38.18

Full Name (Last, First, Middle Initial)

**C. LISA D COCHRANE**

Mailing Address 270 FAIRVIEW AVENUE

City State Zip Code  
 WINNETKA IL 60093

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-MRK-Integrated Mrktng

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

988.05

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

**Transaction ID : A2013-4572477**

Amount of Each Receipt this Period

38.18

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

108.54



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

**A. PATRICK E COCHRANE**

Mailing Address 6911 Brimstone Lane

City State Zip Code  
 Fairfax Station VA 22039

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

HR-Client Partner Field B

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

414.19

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

Transaction ID : A2013-4523672

Amount of Each Receipt this Period

16.67

Full Name (Last, First, Middle Initial)

**B. PATRICK E COCHRANE**

Mailing Address 6911 Brimstone Lane

City State Zip Code  
 Fairfax Station VA 22039

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

HR-Client Partner Field B

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.86

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

Transaction ID : A2013-4572396

Amount of Each Receipt this Period

16.67

Full Name (Last, First, Middle Initial)

**C. PATRICIA A COFFEY**

Mailing Address 21200 W. KEPWICK

City State Zip Code  
 KILDEER IL 60047

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ATO-Bus Prtn-Shared S

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

725.62

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

Transaction ID : A2013-4523756

Amount of Each Receipt this Period

34.63

SUBTOTAL of Receipts This Page (optional)..... ►

67.97

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. PATRICIA A COFFEY**

Mailing Address 21200 W. KEPWICK

City  
KILDEER

State Zip Code  
IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
SVP-ATO-Bus Prtn-Shared S

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

760.25

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

**Transaction ID : A2013-4572480**

Amount of Each Receipt this Period

34.63

Full Name (Last, First, Middle Initial)

## **B. EDWARD T COLLINS**

Mailing Address 809 DUNHILL COURT

City  
GURNEE

State Zip Code  
IL 60031

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
VP-LGL-Public Policy Deve

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.48

Date of Receipt

M M / D D / Y Y Y Y Y  
12 13 2013

**Transaction ID : A2013-4523724**

Amount of Each Receipt this Period

50.41

Full Name (Last, First, Middle Initial)

## **C. EDWARD T COLLINS**

Mailing Address 809 DUNHILL COURT

City  
GURNEE

State Zip Code  
IL 60031

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
VP-LGL-Public Policy Deve

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.89

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

**Transaction ID : A2013-4572448**

Amount of Each Receipt this Period

50.41

**SUBTOTAL** of Receipts This Page (optional)..... ►

135.45

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 35 OF 213

(check only one)

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. LARRY K CONLEE**

Mailing Address 363 Kensington Ct.

City State Zip Code  
Palatine IL 60067

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Actuary

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

511.23

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523744**

Amount of Each Receipt this Period

20.53

Full Name (Last, First, Middle Initial)

**B. LARRY K CONLEE**

Mailing Address 363 Kensington Ct.

City State Zip Code  
Palatine IL 60067

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Actuary

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

531.76

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2013

**Transaction ID : A2013-4572468**

Amount of Each Receipt this Period

20.53

Full Name (Last, First, Middle Initial)

**C. PETER T CORRIGAN**

Mailing Address 28852 FOREST LAKE LANE

City State Zip Code  
GREEN OAKS IL 60048

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ATO-Bus Prtn-Sales &

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1586.80

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523619**

Amount of Each Receipt this Period

63.78

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

104.84

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

**A. PETER T CORRIGAN**

Mailing Address 28852 FOREST LAKE LANE

City State Zip Code  
GREEN OAKS IL 60048

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ATO-Bus Prtn-Sales &amp;

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1650.58

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

Transaction ID : A2013-4572343

Amount of Each Receipt this Period

63.78

Full Name (Last, First, Middle Initial)

**B. ERROL CRAMER**

Mailing Address 1111 SARANAC AVE.

City State Zip Code  
NORTHBROOK IL 60062

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-AF-Chief Actuary

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 13 2013

Transaction ID : A2013-4523758

Amount of Each Receipt this Period

18.89

Full Name (Last, First, Middle Initial)

**C. ERROL CRAMER**

Mailing Address 1111 SARANAC AVE.

City State Zip Code  
NORTHBROOK IL 60062

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-AF-Chief Actuary

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

488.89

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

Transaction ID : A2013-4572482

Amount of Each Receipt this Period

18.89

SUBTOTAL of Receipts This Page (optional)..... ►

101.56

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)****ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 37 OF 213  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. RICHARD C CRIST Jr.**

Mailing Address 252 Center Point Lane

City	State	Zip Code
Lansdale	PA	19446

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1848.35

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	13	/	2013

**Transaction ID : A2013-4523655**

Amount of Each Receipt this Period

74.13

Full Name (Last, First, Middle Initial)

**B. RICHARD C CRIST Jr.**

Mailing Address 252 Center Point Lane

City	State	Zip Code
Lansdale	PA	19446

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1922.48

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	27	/	2013

**Transaction ID : A2013-4572379**

Amount of Each Receipt this Period

74.13

Full Name (Last, First, Middle Initial)

**C. ROBERT W DANIELS**

Mailing Address 1020 Pleasant Street #1

City	State	Zip Code
Oak Park	IL	60302

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corp Rel Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

992.09

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	13	/	2013

**Transaction ID : A2013-4523673**

Amount of Each Receipt this Period

39.79

**SUBTOTAL** of Receipts This Page (optional)..... ►

188.05

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

**A. ROBERT W DANIELS**

Mailing Address 1020 Pleasant Street #1

City State Zip Code  
 Oak Park IL 60302

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corp Rel Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1031.88

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

Transaction ID : A2013-4572397

Amount of Each Receipt this Period

39.79

Full Name (Last, First, Middle Initial)

**B. JOHN A DAVISON**

Mailing Address 2104 Butternut Ln

City State Zip Code  
 NORTHBROOK IL 60062

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims Senior Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

454.13

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

Transaction ID : A2013-4523682

Amount of Each Receipt this Period

18.23

Full Name (Last, First, Middle Initial)

**C. JOHN A DAVISON**

Mailing Address 2104 Butternut Ln

City State Zip Code  
 NORTHBROOK IL 60062

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims Senior Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

472.36

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

Transaction ID : A2013-4572406

Amount of Each Receipt this Period

18.23

SUBTOTAL of Receipts This Page (optional)..... ►

76.25

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. RANDALL S DECOURSEY**

Mailing Address 1954 Oakwood Dr

City State Zip Code  
Arlington Heights IL 60004

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
Allstate Insurance Company VP-AF-Contact Center Impl

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1214.22

Date of Receipt

M M / D D / Y Y Y Y Y  
12 13 2013

**Transaction ID : A2013-4523725**

Amount of Each Receipt this Period

43.68

Full Name (Last, First, Middle Initial)

**B. RANDALL S DECOURSEY**

Mailing Address 1954 Oakwood Dr

City State Zip Code  
Arlington Heights IL 60004

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
Allstate Insurance Company VP-AF-Contact Center Impl

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1257.90

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

**Transaction ID : A2013-4572449**

Amount of Each Receipt this Period

43.68

Full Name (Last, First, Middle Initial)

**C. STEVEN J DEGNAN-SCHMIDT**

Mailing Address 1320 MULBERRY LN.

City State Zip Code  
CARY IL 60013

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
Allstate Insurance Company ATO-Manager-Director

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1054.51

Date of Receipt

M M / D D / Y Y Y Y Y  
12 13 2013

**Transaction ID : A2013-4523689**

Amount of Each Receipt this Period

42.33

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

129.69

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. STEVEN J DEGNAN-SCHMIDT**

Mailing Address 1320 MULBERRY LN.

City State Zip Code  
CARY IL 60013

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
ATO-Manager-Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1096.84

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

**Transaction ID : A2013-4572413**

Amount of Each Receipt this Period

42.33

Full Name (Last, First, Middle Initial)

**B. JEFFREY F DEIGL**

Mailing Address 453 PRAIRIE

City State Zip Code  
ELMHURST IL 60126

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
VP-PRD-Product Vice Presi

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1398.78

Date of Receipt

M M / D D / Y Y Y Y Y  
12 13 2013

**Transaction ID : A2013-4523795**

Amount of Each Receipt this Period

56.07

Full Name (Last, First, Middle Initial)

**C. JEFFREY F DEIGL**

Mailing Address 453 PRAIRIE

City State Zip Code  
ELMHURST IL 60126

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
VP-PRD-Product Vice Presi

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1454.85

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

**Transaction ID : A2013-4572519**

Amount of Each Receipt this Period

56.07

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

154.47



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. DEIDRE B DERRIG**

Mailing Address 460 TOWER ROAD

City

BARRINGTON

State

IL

Zip Code

60010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.93

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523776**

Amount of Each Receipt this Period

22.50

Full Name (Last, First, Middle Initial)

**B. DEIDRE B DERRIG**

Mailing Address 460 TOWER ROAD

City

BARRINGTON

State

IL

Zip Code

60010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

583.43

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2013

**Transaction ID : A2013-4572500**

Amount of Each Receipt this Period

22.50

Full Name (Last, First, Middle Initial)

**C. Kristine DiGirolamo**

Mailing Address 10123 NORTH RIVER ROAD

City

BARRINGTON HILLS

State

IL

Zip Code

60102

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Compliance Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

523.73

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523823**

Amount of Each Receipt this Period

21.05

**SUBTOTAL** of Receipts This Page (optional)..... ►

66.05

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. Kristine DiGirolamo**

Mailing Address 10123 NORTH RIVER ROAD

City State Zip Code  
 BARRINGTON HILLS IL 60102

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Compliance Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

544.78

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

**Transaction ID : A2013-4572547**

Amount of Each Receipt this Period

21.05

Full Name (Last, First, Middle Initial)

**B. Victoria A Dinges**

Mailing Address 421 Chapel Hill Lane

City State Zip Code  
 Northfield IL 60093

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-CR-Public Social Respo

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1468.39

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

**Transaction ID : A2013-4523886**

Amount of Each Receipt this Period

59.02

Full Name (Last, First, Middle Initial)

**C. Victoria A Dinges**

Mailing Address 421 Chapel Hill Lane

City State Zip Code  
 Northfield IL 60093

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-CR-Public Social Respo

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1527.41

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

**Transaction ID : A2013-4572610**

Amount of Each Receipt this Period

59.02

**SUBTOTAL** of Receipts This Page (optional)..... ►

139.09

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. SARAH R DONAHUE**

Mailing Address 4147 RFD

City

LONG GROVE

State

IL

Zip Code

60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-AF-Program Mgmt Office

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1518.80

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523777**

Amount of Each Receipt this Period

60.86

Full Name (Last, First, Middle Initial)

**B. SARAH R DONAHUE**

Mailing Address 4147 RFD

City

LONG GROVE

State

IL

Zip Code

60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-AF-Program Mgmt Office

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1579.66

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2013

**Transaction ID : A2013-4572501**

Amount of Each Receipt this Period

60.86

Full Name (Last, First, Middle Initial)

**C. BRIAN M DONLAN**

Mailing Address 3806 W. Devon Ave

City

Lincolnwood

State

IL

Zip Code

60712

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Actuary

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

531.55

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523844**

Amount of Each Receipt this Period

21.30

**SUBTOTAL** of Receipts This Page (optional)..... ►

143.02

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. BRIAN M DONLAN**

Mailing Address 3806 W. Devon Ave

City

Lincolnwood

State

IL

Zip Code

60712

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Actuary

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

552.85

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2013

**Transaction ID : A2013-4572568**

Amount of Each Receipt this Period

21.30

Full Name (Last, First, Middle Initial)

**B. DANIEL C DRESSEL**

Mailing Address 1706 ADLER LANE

City

MALVERN

State

PA

Zip Code

19355

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims Field Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

535.74

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523657**

Amount of Each Receipt this Period

21.57

Full Name (Last, First, Middle Initial)

**C. DANIEL C DRESSEL**

Mailing Address 1706 ADLER LANE

City

MALVERN

State

PA

Zip Code

19355

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims Field Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

557.31

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2013

**Transaction ID : A2013-4572381**

Amount of Each Receipt this Period

21.57

**SUBTOTAL** of Receipts This Page (optional)..... ►

64.44

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. PATRICIA B DREXLER**

Mailing Address 472 W. SYCAMORE ST.

City

VERNON HILLS

State

IL

Zip Code

60061

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Marketing Senior Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

779.37

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523710**

Amount of Each Receipt this Period

31.47

Full Name (Last, First, Middle Initial)

**B. PATRICIA B DREXLER**

Mailing Address 472 W. SYCAMORE ST.

City

VERNON HILLS

State

IL

Zip Code

60061

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Marketing Senior Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

810.84

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2013

**Transaction ID : A2013-4572434**

Amount of Each Receipt this Period

31.47

Full Name (Last, First, Middle Initial)

**C. SUSAN DUCHAK**

Mailing Address 4815 HIGHLAND AVE.

City

DOWNERS GROVE

State

IL

Zip Code

60515

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corp Rel Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

368.85

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523881**

Amount of Each Receipt this Period

14.88

**SUBTOTAL** of Receipts This Page (optional)..... ►

77.82

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

**A. SUSAN DUCHAK**

Mailing Address 4815 HIGHLAND AVE.

City State Zip Code  
 DOWNERS GROVE IL 60515

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corp Rel Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

383.73

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

Transaction ID : A2013-4572605

Amount of Each Receipt this Period

14.88

Full Name (Last, First, Middle Initial)

**B. DONALD L DUFF**

Mailing Address 2 Washington Ct..

City State Zip Code  
 STREAMWOOD IL 60107

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Product Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

807.12

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

Transaction ID : A2013-4523708

Amount of Each Receipt this Period

32.67

Full Name (Last, First, Middle Initial)

**C. DONALD L DUFF**

Mailing Address 2 Washington Ct..

City State Zip Code  
 STREAMWOOD IL 60107

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Product Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

839.79

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

Transaction ID : A2013-4572432

Amount of Each Receipt this Period

32.67

SUBTOTAL of Receipts This Page (optional)..... ►

80.22

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. MICHAEL S DUNN

Mailing Address 18202 HARNISH RD.

City State Zip Code  
 ROSCOE IL 61073

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Staff Claims Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

704.31

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

Transaction ID : A2013-4523763

Amount of Each Receipt this Period

28.32

Full Name (Last, First, Middle Initial)

B. MICHAEL S DUNN

Mailing Address 18202 HARNISH RD.

City State Zip Code  
 ROSCOE IL 61073

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Staff Claims Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

732.63

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

Transaction ID : A2013-4572487

Amount of Each Receipt this Period

28.32

Full Name (Last, First, Middle Initial)

C. LAURA DUNNE

Mailing Address 1860 Admiral Court

City State Zip Code  
 GLENVIEW IL 60026

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-ENC-Strategy &amp; Project

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

628.15

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

Transaction ID : A2013-4523764

Amount of Each Receipt this Period

25.27

SUBTOTAL of Receipts This Page (optional)..... ►

81.91

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. LAURA DUNNE**

Mailing Address 1860 Admiral Court

City State Zip Code  
 GLENVIEW IL 60026

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-ENC-Strategy & Project

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

653.42

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

**Transaction ID : A2013-4572488**

Amount of Each Receipt this Period

25.27

Full Name (Last, First, Middle Initial)

## **B. DOUGLAS P DUPONT**

Mailing Address 12 ESSEX LANE

City State Zip Code  
 LINCOLNSHIRE IL 60069

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

MD-INV-Portfolio Manageme

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

734.50

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

**Transaction ID : A2013-4523817**

Amount of Each Receipt this Period

29.38

Full Name (Last, First, Middle Initial)

## **C. DOUGLAS P DUPONT**

Mailing Address 12 ESSEX LANE

City State Zip Code  
 LINCOLNSHIRE IL 60069

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

MD-INV-Portfolio Manageme

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

763.88

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

**Transaction ID : A2013-4572541**

Amount of Each Receipt this Period

29.38

**SUBTOTAL** of Receipts This Page (optional)..... ►

84.03

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. JEFFREY P DWYER**

Mailing Address 44 CHAMPLAIN COURT

City State Zip Code  
 MANAHAWKIN NJ 08050

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Allstate Insurance Company

Occupation  
 Market Claim Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

387.88

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

**Transaction ID : A2013-4523618**

Amount of Each Receipt this Period

15.82

Full Name (Last, First, Middle Initial)

**B. JEFFREY P DWYER**

Mailing Address 44 CHAMPLAIN COURT

City State Zip Code  
 MANAHAWKIN NJ 08050

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Allstate Insurance Company

Occupation  
 Market Claim Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

403.70

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

**Transaction ID : A2013-4572342**

Amount of Each Receipt this Period

15.82

Full Name (Last, First, Middle Initial)

**C. Thomas V Ealy**

Mailing Address 1541 West Wolfram Street

City State Zip Code  
 Chicago IL 60657

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Allstate Insurance Company

Occupation  
 SVP-ENC-President Encompa

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2064.76

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

**Transaction ID : A2013-4523900**

Amount of Each Receipt this Period

82.99

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

114.63

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. Thomas V Ealy**

Mailing Address 1541 West Wolfram Street

City State Zip Code  
 Chicago IL 60657

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ENC-President Encompa

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2147.75

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

**Transaction ID : A2013-4572624**

Amount of Each Receipt this Period

82.99

Full Name (Last, First, Middle Initial)

**B. SHARON P EDWARDS**

Mailing Address 469 E. HOME AVENUE

City State Zip Code  
 PALATINE IL 60074

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Sr. Manager Accounting/Fi

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

271.51

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

**Transaction ID : A2013-4523730**

Amount of Each Receipt this Period

10.90

Full Name (Last, First, Middle Initial)

**C. SHARON P EDWARDS**

Mailing Address 469 E. HOME AVENUE

City State Zip Code  
 PALATINE IL 60074

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Sr. Manager Accounting/Fi

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.41

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

**Transaction ID : A2013-4572454**

Amount of Each Receipt this Period

10.90

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

104.79

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. ROBERT N EMMICH**

Mailing Address 108 SADDLE CREEK COVE

City State Zip Code  
CANTON MS 39046

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Territorial Sales Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

462.83

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523876**

Amount of Each Receipt this Period

18.58

Full Name (Last, First, Middle Initial)

**B. ROBERT N EMMICH**

Mailing Address 108 SADDLE CREEK COVE

City State Zip Code  
CANTON MS 39046

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Territorial Sales Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

481.41

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2013

**Transaction ID : A2013-4572600**

Amount of Each Receipt this Period

18.58

Full Name (Last, First, Middle Initial)

**C. KATHLEEN N ENRIGHT**

Mailing Address 10323 TRUMBULL AVE

City State Zip Code  
CHICAGO IL 60655

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
VP-FSS-Accounting

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1161.55

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523786**

Amount of Each Receipt this Period

52.97

**SUBTOTAL** of Receipts This Page (optional)..... ►

90.13

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. KATHLEEN N ENRIGHT**

Mailing Address 10323 TRUMBULL AVE

City  
CHICAGO

State Zip Code  
IL 60655

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
VP-FSS-Accounting

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1214.52

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

**Transaction ID : A2013-4572510**

Amount of Each Receipt this Period

52.97

Full Name (Last, First, Middle Initial)

**B. MICHAEL L ESCOBAR**

Mailing Address 660 BALMORAL LANE

City  
INVERNESS

State Zip Code  
IL 60067

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
VP-HR-Diversity & Org. Ef

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1436.49

Date of Receipt

M M / D D / Y Y Y Y Y  
12 13 2013

**Transaction ID : A2013-4523623**

Amount of Each Receipt this Period

57.69

Full Name (Last, First, Middle Initial)

**C. MICHAEL L ESCOBAR**

Mailing Address 660 BALMORAL LANE

City  
INVERNESS

State Zip Code  
IL 60067

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
VP-HR-Diversity & Org. Ef

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1494.18

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

**Transaction ID : A2013-4572347**

Amount of Each Receipt this Period

57.69

**SUBTOTAL** of Receipts This Page (optional)..... ►

168.35

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. CAROLYN A FILIPOVIC**

Mailing Address 918 JUNIPER ROAD

City  
GLENVIEW

State Zip Code  
IL 60025

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Ethics Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.36

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523811**

Amount of Each Receipt this Period

31.38

Full Name (Last, First, Middle Initial)

**B. CAROLYN A FILIPOVIC**

Mailing Address 918 JUNIPER ROAD

City  
GLENVIEW

State Zip Code  
IL 60025

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Ethics Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

811.74

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2013

**Transaction ID : A2013-4572535**

Amount of Each Receipt this Period

31.38

Full Name (Last, First, Middle Initial)

**C. STEVEN FINE**

Mailing Address 40375 N. SEA EAGLE CT

City  
ANTIOCH

State Zip Code  
IL 60002

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Sales Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

695.02

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523648**

Amount of Each Receipt this Period

27.90

**SUBTOTAL** of Receipts This Page (optional)..... ►

90.66

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 54 OF 213

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

**A. STEVEN FINE**

Mailing Address 40375 N. SEA EAGLE CT

City State Zip Code  
 ANTIOCH IL 60002

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Sales Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

722.92

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

Transaction ID : A2013-4572372

Amount of Each Receipt this Period

27.90

Full Name (Last, First, Middle Initial)

**B. LISA J FLANARY**

Mailing Address 1007 Harris Road

City State Zip Code  
 GRAYSLAKE IL 60030

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-AF-Chief of Staff &amp; St

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

982.91

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

Transaction ID : A2013-4523819

Amount of Each Receipt this Period

39.59

Full Name (Last, First, Middle Initial)

**C. LISA J FLANARY**

Mailing Address 1007 Harris Road

City State Zip Code  
 GRAYSLAKE IL 60030

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-AF-Chief of Staff &amp; St

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1022.50

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

Transaction ID : A2013-4572543

Amount of Each Receipt this Period

39.59

SUBTOTAL of Receipts This Page (optional)..... ►

107.08

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 55 OF 213  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. KELLY F FOGARTY**

Mailing Address 613 REX

City State Zip Code  
ELMHURST IL 60126

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
Allstate Insurance Company VP-Affinity Solutions Chi

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1244.67

Date of Receipt

M M / D D / Y Y Y Y Y  
12 13 2013

**Transaction ID : A2013-4523732**

Amount of Each Receipt this Period

50.19

Full Name (Last, First, Middle Initial)

**B. KELLY F FOGARTY**

Mailing Address 613 REX

City State Zip Code  
ELMHURST IL 60126

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
Allstate Insurance Company VP-Affinity Solutions Chi

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1294.86

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

**Transaction ID : A2013-4572456**

Amount of Each Receipt this Period

50.19

Full Name (Last, First, Middle Initial)

**C. ANGELA K FONTANA**

Mailing Address 1280 WILD ROSE LANE

City State Zip Code  
LAKE FOREST IL 60045

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
Allstate Insurance Company VP-LGL-Allstate Financial

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1316.66

Date of Receipt

M M / D D / Y Y Y Y Y  
12 13 2013

**Transaction ID : A2013-4523846**

Amount of Each Receipt this Period

52.83

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

153.21

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 56 OF 213

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

**A. ANGELA K FONTANA**

Mailing Address 1280 WILD ROSE LANE

City State Zip Code  
 LAKE FOREST IL 60045

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-LGL-Allstate Financial

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1369.49

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

Transaction ID : A2013-4572570

Amount of Each Receipt this Period

52.83

Full Name (Last, First, Middle Initial)

**B. SARA A FOSTER**

Mailing Address 2216 BARRETT DR

City State Zip Code  
 ALGONQUIN IL 60102

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Six Sigma-Expert

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

831.05

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

Transaction ID : A2013-4523743

Amount of Each Receipt this Period

33.53

Full Name (Last, First, Middle Initial)

**C. SARA A FOSTER**

Mailing Address 2216 BARRETT DR

City State Zip Code  
 ALGONQUIN IL 60102

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Six Sigma-Expert

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

864.58

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

Transaction ID : A2013-4572467

Amount of Each Receipt this Period

33.53

SUBTOTAL of Receipts This Page (optional)..... ►

119.89

TOTAL This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 57 OF 213  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. ANGELA M Fusco**

Mailing Address 29 Tullach Place

City State Zip Code  
 Stonebrae CA 94542

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Sales Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1019.97

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

**Transaction ID : A2013-4523656**

Amount of Each Receipt this Period

41.22

Full Name (Last, First, Middle Initial)

**B. ANGELA M Fusco**

Mailing Address 29 Tullach Place

City State Zip Code  
 Stonebrae CA 94542

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Sales Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1061.19

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

**Transaction ID : A2013-4572380**

Amount of Each Receipt this Period

41.22

Full Name (Last, First, Middle Initial)

**C. VINCENT A FUSCO**

Mailing Address 6 SUGAR MAPLE COURT

City State Zip Code  
 DIX HILLS NY 11746

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

695.10

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

**Transaction ID : A2013-4523620**

Amount of Each Receipt this Period

27.95

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

110.39

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 58 OF 213

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

**A. VINCENT A FUSCO**

Mailing Address 6 SUGAR MAPLE COURT

City State Zip Code  
DIX HILLS NY 11746

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

723.05

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

Transaction ID : A2013-4572344

Amount of Each Receipt this Period

27.95

Full Name (Last, First, Middle Initial)

**B. ANNA M GALL**

Mailing Address 1667 FLAGSTONE DRIVE

City State Zip Code  
CRYSTAL LAKE IL 60014

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Leader-Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

433.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 13 2013

Transaction ID : A2013-4523706

Amount of Each Receipt this Period

17.32

Full Name (Last, First, Middle Initial)

**C. ANNA M GALL**

Mailing Address 1667 FLAGSTONE DRIVE

City State Zip Code  
CRYSTAL LAKE IL 60014

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Leader-Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.32

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

Transaction ID : A2013-4572430

Amount of Each Receipt this Period

17.32

SUBTOTAL of Receipts This Page (optional)..... ►

62.59

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 59 OF 213

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. MARY C GARDNER**

Mailing Address 4506 DEER TRAIL

City State Zip Code  
NORTHBROOK IL 60062

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Privacy Sr. Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

329.95

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523652**

Amount of Each Receipt this Period

13.27

Full Name (Last, First, Middle Initial)

## **B. MARY C GARDNER**

Mailing Address 4506 DEER TRAIL

City State Zip Code  
NORTHBROOK IL 60062

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Privacy Sr. Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

343.22

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2013

**Transaction ID : A2013-4572376**

Amount of Each Receipt this Period

13.27

Full Name (Last, First, Middle Initial)

## **C. NICK GEORGAKOPOULOS**

Mailing Address 1129 N Mitchell Ave

City State Zip Code  
Arlington Heights IL 60004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Finance Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

970.16

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523748**

Amount of Each Receipt this Period

39.01

**SUBTOTAL** of Receipts This Page (optional)..... ►

65.55

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 60 OF 213  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. NICK GEORGAKOPOULOS**

Mailing Address 1129 N Mitchell Ave

City State Zip Code  
Arlington Heights IL 60004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Finance Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1009.17

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

**Transaction ID : A2013-4572472**

Amount of Each Receipt this Period

39.01

Full Name (Last, First, Middle Initial)

**B. MARIBEL V GERSTNER**

Mailing Address 2754 CHARLIE CT.

City State Zip Code  
GLENVIEW IL 60026

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-AF-Pres & Chief Operat

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1228.37

Date of Receipt

M M / D D / Y Y Y Y Y  
12 13 2013

**Transaction ID : A2013-4523720**

Amount of Each Receipt this Period

49.72

Full Name (Last, First, Middle Initial)

**C. MARIBEL V GERSTNER**

Mailing Address 2754 CHARLIE CT.

City State Zip Code  
GLENVIEW IL 60026

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-AF-Pres & Chief Operat

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1278.09

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

**Transaction ID : A2013-4572444**

Amount of Each Receipt this Period

49.72

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

138.45

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 61 OF 213

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. BONNIE S GILL**

Mailing Address 1570 EDGEFIELD LANE

City State Zip Code  
 HOFFMAN ESTATES IL 60169

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
 Allstate Insurance Company VP-PRD-Product Vice Presi

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

826.36

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

**Transaction ID : A2013-4523848**

Amount of Each Receipt this Period

33.20

Full Name (Last, First, Middle Initial)

**B. BONNIE S GILL**

Mailing Address 1570 EDGEFIELD LANE

City State Zip Code  
 HOFFMAN ESTATES IL 60169

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
 Allstate Insurance Company VP-PRD-Product Vice Presi

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

859.56

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

**Transaction ID : A2013-4572572**

Amount of Each Receipt this Period

33.20

Full Name (Last, First, Middle Initial)

**C. JOAN M GILMORE**

Mailing Address 656 S BUCKINGHAM CT

City State Zip Code  
 LAKE FOREST IL 60045

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
 Allstate Insurance Company Director Litigation Servi

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1121.27

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

**Transaction ID : A2013-4523624**

Amount of Each Receipt this Period

45.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

111.40

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 62 OF 213

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. JOAN M GILMORE**

Mailing Address 656 S BUCKINGHAM CT

City

LAKE FOREST

State

IL

Zip Code

60045

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Director Litigation Servi

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1166.27

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2013

**Transaction ID : A2013-4572348**

Amount of Each Receipt this Period

45.00

Full Name (Last, First, Middle Initial)

**B. WILLIAM T GOFF**

Mailing Address 310 Plantation Way

City

Roswell

State

GA

Zip Code

30075

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-SAL-Field Vice Preside

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

558.94

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523625**

Amount of Each Receipt this Period

22.57

Full Name (Last, First, Middle Initial)

**C. WILLIAM T GOFF**

Mailing Address 310 Plantation Way

City

Roswell

State

GA

Zip Code

30075

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-SAL-Field Vice Preside

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

581.51

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2013

**Transaction ID : A2013-4572349**

Amount of Each Receipt this Period

22.57

**SUBTOTAL** of Receipts This Page (optional)..... ►

90.14

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)****ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 63 OF 213  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. DEBORAH M GOLAN**

Mailing Address 921 CREEK BEND DR.

City	State	Zip Code
VERNON HILLS	IL	60061

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Tax Senior Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.28

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	27	/	2013

**Transaction ID : A2013-4572537**

Amount of Each Receipt this Period

8.65

Full Name (Last, First, Middle Initial)

**B. BRUCE R GOLDBERG**

Mailing Address 10 MULBERRY LN

City	State	Zip Code
HAWTHORN WOODS	IL	60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

548.82

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	13	/	2013

**Transaction ID : A2013-4523715**

Amount of Each Receipt this Period

22.05

Full Name (Last, First, Middle Initial)

**C. BRUCE R GOLDBERG**

Mailing Address 10 MULBERRY LN

City	State	Zip Code
HAWTHORN WOODS	IL	60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.87

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	27	/	2013

**Transaction ID : A2013-4572439**

Amount of Each Receipt this Period

22.05

**SUBTOTAL** of Receipts This Page (optional)..... ►

52.75

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. ANN A GOULD**

Mailing Address 4071 NEWPORT LANE

City State Zip Code  
 ARLINGTON HTS IL 60004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

893.30

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

**Transaction ID : A2013-4523873**

Amount of Each Receipt this Period

35.86

Full Name (Last, First, Middle Initial)

## **B. ANN A GOULD**

Mailing Address 4071 NEWPORT LANE

City State Zip Code  
 ARLINGTON HTS IL 60004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

929.16

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

**Transaction ID : A2013-4572597**

Amount of Each Receipt this Period

35.86

Full Name (Last, First, Middle Initial)

## **C. GEORGE F GRAWE**

Mailing Address 801 N. Vail Avenue

City State Zip Code  
 Arlington Heights IL 60004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-LGL-Staff & Retained C

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1070.55

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

**Transaction ID : A2013-4523684**

Amount of Each Receipt this Period

51.24

**SUBTOTAL** of Receipts This Page (optional)..... ►

122.96

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

**A. GEORGE F GRAWE**

Mailing Address 801 N. Vail Avenue

City State Zip Code  
Arlington Heights IL 60004

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-LGL-Staff &amp; Retained C

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1121.79

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

Transaction ID : A2013-4572408

Amount of Each Receipt this Period

51.24

Full Name (Last, First, Middle Initial)

**B. KELLIE H GREEN**

Mailing Address 150 Meadowlark Circle

City State Zip Code  
Lindenhurst IL 60046

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Marketing Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

432.31

Date of Receipt

M M / D D / Y Y Y Y Y  
12 13 2013

Transaction ID : A2013-4523670

Amount of Each Receipt this Period

19.96

Full Name (Last, First, Middle Initial)

**C. KELLIE H GREEN**

Mailing Address 150 Meadowlark Circle

City State Zip Code  
Lindenhurst IL 60046

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Marketing Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

451.40

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

Transaction ID : A2013-4572394

Amount of Each Receipt this Period

19.09

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

90.29

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

**A. Mark A Green**

Mailing Address 1711 Wildwood Ct

City State Zip Code  
Glenview IL 60025

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-EB-President Ivantage

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1463.60

Date of Receipt

M M / D D / Y Y Y Y Y  
12 13 2013

Transaction ID : A2013-4523892

Amount of Each Receipt this Period

59.05

Full Name (Last, First, Middle Initial)

**B. Mark A Green**

Mailing Address 1711 Wildwood Ct

City State Zip Code  
Glenview IL 60025

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-EB-President Ivantage

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1522.65

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

Transaction ID : A2013-4572616

Amount of Each Receipt this Period

59.05

Full Name (Last, First, Middle Initial)

**C. JUDITH P GREFFIN**

Mailing Address 338 North Kenilworth

City State Zip Code  
OAK PARK IL 60302

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-INV-Chief Investment

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1830.64

Date of Receipt

M M / D D / Y Y Y Y Y  
12 13 2013

Transaction ID : A2013-4523693

Amount of Each Receipt this Period

73.85

SUBTOTAL of Receipts This Page (optional)..... ►

191.95

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. JUDITH P GREFFIN**

Mailing Address 338 North Kenilworth

City State Zip Code  
 OAK PARK IL 60302

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-INV-Chief Investment

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1904.49

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

**Transaction ID : A2013-4572417**

Amount of Each Receipt this Period

73.85

Full Name (Last, First, Middle Initial)

## **B. M'BA G GREGOIRE**

Mailing Address 35 Linden Road

City State Zip Code  
 Lake Zurich IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Director Litigation Servi

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.84

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

**Transaction ID : A2013-4523875**

Amount of Each Receipt this Period

18.82

Full Name (Last, First, Middle Initial)

## **C. M'BA G GREGOIRE**

Mailing Address 35 Linden Road

City State Zip Code  
 Lake Zurich IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Director Litigation Servi

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

479.66

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

**Transaction ID : A2013-4572599**

Amount of Each Receipt this Period

18.82

**SUBTOTAL** of Receipts This Page (optional)..... ►

111.49

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. MARYLIN H GROOM**

Mailing Address 170 ASPINWALL STREET

City State Zip Code  
 WESTBURY NY 11590

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Sales Support Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.07

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

**Transaction ID : A2013-4523635**

Amount of Each Receipt this Period

18.42

Full Name (Last, First, Middle Initial)

**B. MARYLIN H GROOM**

Mailing Address 170 ASPINWALL STREET

City State Zip Code  
 WESTBURY NY 11590

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Sales Support Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

476.49

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

**Transaction ID : A2013-4572359**

Amount of Each Receipt this Period

18.42

Full Name (Last, First, Middle Initial)

**C. Gerard T GROUZARD**

Mailing Address 943 W CAROLYN DR

City State Zip Code  
 PALATINE IL 60067

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Leader-Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

413.08

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

**Transaction ID : A2013-4523713**

Amount of Each Receipt this Period

16.59

**SUBTOTAL** of Receipts This Page (optional)..... ►

53.43

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. Gerard T GROUZARD**

Mailing Address 943 W CAROLYN DR

City

PALATINE

State

IL

Zip Code

60067

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Leader-Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

429.67

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2013

**Transaction ID : A2013-4572437**

Amount of Each Receipt this Period

16.59

Full Name (Last, First, Middle Initial)

**B. GREGORY J GUIDOS**

Mailing Address 6130 St. Andrews Ct.

City

Ponte Vedra Beach

State

FL

Zip Code

32082

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-AF-President Allstate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

804.10

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523810**

Amount of Each Receipt this Period

32.40

Full Name (Last, First, Middle Initial)

**C. GREGORY J GUIDOS**

Mailing Address 6130 St. Andrews Ct.

City

Ponte Vedra Beach

State

FL

Zip Code

32082

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-AF-President Allstate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

836.50

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2013

**Transaction ID : A2013-4572534**

Amount of Each Receipt this Period

32.40

**SUBTOTAL** of Receipts This Page (optional)..... ►

81.39

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Sanjay Gupta

Mailing Address 1971 Farnsworth Ln

City State Zip Code  
 Northbrook IL 60062

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-Mktg Innovation &amp; Co

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

436.17

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

Transaction ID : A2013-4523912

Amount of Each Receipt this Period

62.31

Full Name (Last, First, Middle Initial)

B. Sanjay Gupta

Mailing Address 1971 Farnsworth Ln

City State Zip Code  
 Northbrook IL 60062

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-Mktg Innovation &amp; Co

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

498.48

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

Transaction ID : A2013-4572635

Amount of Each Receipt this Period

62.31

Full Name (Last, First, Middle Initial)

C. JAMES W HAIDU

Mailing Address 3 South Wynstone

City State Zip Code  
 N. BARRINGTON IL 60010

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-PRD-Chief Actuary

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.55

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

Transaction ID : A2013-4523767

Amount of Each Receipt this Period

10.68

SUBTOTAL of Receipts This Page (optional)..... ►

135.30

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. JAMES W HAIDU**

Mailing Address 3 South Wynstone

City

N. BARRINGTON

State

IL

Zip Code

60010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-PRD-Chief Actuary

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

277.23

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2013

**Transaction ID : A2013-4572491**

Amount of Each Receipt this Period

10.68

Full Name (Last, First, Middle Initial)

**B. ROBERT R HALPERN-GIVENS**

Mailing Address 3001 SUTTON WOODS CT

City

CRYSTAL LAKE

State

IL

Zip Code

60012

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

HR-Payroll & Relocation-S

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

449.69

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523785**

Amount of Each Receipt this Period

18.02

Full Name (Last, First, Middle Initial)

**C. ROBERT R HALPERN-GIVENS**

Mailing Address 3001 SUTTON WOODS CT

City

CRYSTAL LAKE

State

IL

Zip Code

60012

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

HR-Payroll & Relocation-S

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

467.71

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2013

**Transaction ID : A2013-4572509**

Amount of Each Receipt this Period

18.02

**SUBTOTAL** of Receipts This Page (optional)..... ►

46.72

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. RANDALL M HANSON**

Mailing Address 840 ALLEGHANY

City  
GRAYSLAKE

State Zip Code  
IL 60030

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Claim Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1008.69

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523854**

Amount of Each Receipt this Period

40.56

Full Name (Last, First, Middle Initial)

**B. RANDALL M HANSON**

Mailing Address 840 ALLEGHANY

City  
GRAYSLAKE

State Zip Code  
IL 60030

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Claim Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1049.25

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2013

**Transaction ID : A2013-4572578**

Amount of Each Receipt this Period

40.56

Full Name (Last, First, Middle Initial)

**c. David S Harper**

Mailing Address 41 Lancaster Lane

City  
Lincolnshire

State Zip Code  
IL 60069

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
SVP-FSS-Tax

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1625.24

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523894**

Amount of Each Receipt this Period

65.24

**SUBTOTAL** of Receipts This Page (optional)..... ►

146.36

**TOTAL** This Period (last page this line number only)..... ►



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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. David S Harper

Mailing Address 41 Lancaster Lane

City State Zip Code  
 Lincolnshire IL 60069

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-FSS-Tax

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1690.48

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

Transaction ID : A2013-4572618

Amount of Each Receipt this Period

65.24

Full Name (Last, First, Middle Initial)

B. Cheryl A Harris

Mailing Address 4136 Three Lakes Drive

City State Zip Code  
 Long Grove IL 60047

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SPS-Sourcing &amp; Procur

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

819.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

Transaction ID : A2013-4523908

Amount of Each Receipt this Period

63.00

Full Name (Last, First, Middle Initial)

c. Cheryl A Harris

Mailing Address 4136 Three Lakes Drive

City State Zip Code  
 Long Grove IL 60047

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SPS-Sourcing &amp; Procur

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

882.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

Transaction ID : A2013-4572631

Amount of Each Receipt this Period

63.00

SUBTOTAL of Receipts This Page (optional)..... ►

191.24

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 74 OF 213

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Jacqueline J Hart

Mailing Address 1431 W. Walton

City State Zip Code  
 Chicago IL 60622

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Field Administration Dire

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

429.91

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

Transaction ID : A2013-4523888

Amount of Each Receipt this Period

17.31

Full Name (Last, First, Middle Initial)

B. Jacqueline J Hart

Mailing Address 1431 W. Walton

City State Zip Code  
 Chicago IL 60622

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Field Administration Dire

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

447.22

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

Transaction ID : A2013-4572612

Amount of Each Receipt this Period

17.31

Full Name (Last, First, Middle Initial)

C. KEITH A HAUSCHILDT

Mailing Address 21 Little Bay Harbor Drive

City State Zip Code  
 Ponte Vedra FL 32082

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-AF-Ops &amp; Technology AI

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

703.78

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

Transaction ID : A2013-4523690

Amount of Each Receipt this Period

28.85

SUBTOTAL of Receipts This Page (optional)..... ►

63.47

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 75 OF 213

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

**A. KEITH A HAUSCHILDT**

Mailing Address 21 Little Bay Harbor Drive

City State Zip Code  
 Ponte Vedra FL 32082

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-AF-Ops &amp; Technology AI

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

732.63

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

Transaction ID : A2013-4572414

Amount of Each Receipt this Period

28.85

Full Name (Last, First, Middle Initial)

**B. JEFFREY R HEALY**

Mailing Address 7452 BERKELEY CIRCLE

City State Zip Code  
 CASTLE ROCK CO 80108

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Regional Financial Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

426.54

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

Transaction ID : A2013-4523641

Amount of Each Receipt this Period

17.13

Full Name (Last, First, Middle Initial)

**C. JEFFREY R HEALY**

Mailing Address 7452 BERKELEY CIRCLE

City State Zip Code  
 CASTLE ROCK CO 80108

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Regional Financial Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

443.67

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

Transaction ID : A2013-4572365

Amount of Each Receipt this Period

17.13

SUBTOTAL of Receipts This Page (optional)..... ►

63.11

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 76 OF 213

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JASON J HEIGER

Mailing Address 990 INDIAN SPRING LANE

City State Zip Code  
 BUFFALO GROVE IL 60089

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Audit Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

412.56

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

Transaction ID : A2013-4523615

Amount of Each Receipt this Period

16.73

Full Name (Last, First, Middle Initial)

B. JASON J HEIGER

Mailing Address 990 INDIAN SPRING LANE

City State Zip Code  
 BUFFALO GROVE IL 60089

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Audit Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

429.29

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

Transaction ID : A2013-4572339

Amount of Each Receipt this Period

16.73

Full Name (Last, First, Middle Initial)

C. EYVONNA HEMPHILL

Mailing Address 337 46TH AVE

City State Zip Code  
 BELLWOOD IL 60104

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Qty Comp &amp; Edu Sr. Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.68

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

Transaction ID : A2013-4523723

Amount of Each Receipt this Period

17.11

SUBTOTAL of Receipts This Page (optional)..... ►

50.57

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 77 OF 213

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

**A. EYVONNA HEMPHILL**

Mailing Address 337 46TH AVE

City State Zip Code  
 BELLWOOD IL 60104

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Qty Comp &amp; Edu Sr. Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

442.79

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

Transaction ID : A2013-4572447

Amount of Each Receipt this Period

17.11

Full Name (Last, First, Middle Initial)

**B. Barbara A Higgins**

Mailing Address 2107 N Lakewood Ave

City State Zip Code  
 Chicago IL 60614

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-PC-Customer Retention

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

917.29

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

Transaction ID : A2013-4523909

Amount of Each Receipt this Period

36.92

Full Name (Last, First, Middle Initial)

**C. Barbara A Higgins**

Mailing Address 2107 N Lakewood Ave

City State Zip Code  
 Chicago IL 60614

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-PC-Customer Retention

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

954.21

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

Transaction ID : A2013-4572632

Amount of Each Receipt this Period

36.92

SUBTOTAL of Receipts This Page (optional)..... ►

90.95

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 78 OF 213

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

**A. EDDIE H HILL**

Mailing Address 8390 Burnt Chimney Road

City State Zip Code  
Wirtz VA 24184

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Leader-Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

419.50

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

Transaction ID : A2013-4523666

Amount of Each Receipt this Period

16.87

Full Name (Last, First, Middle Initial)

**B. EDDIE H HILL**

Mailing Address 8390 Burnt Chimney Road

City State Zip Code  
Wirtz VA 24184

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Leader-Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

436.37

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2013

Transaction ID : A2013-4572390

Amount of Each Receipt this Period

16.87

Full Name (Last, First, Middle Initial)

**C. WILLIAM G HILL**

Mailing Address 2935 GLENARYE DRIVE

City State Zip Code  
LINDENHURST IL 60046

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-PRD-Regional Product

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3189.38

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

Transaction ID : A2013-4523671

Amount of Each Receipt this Period

133.38

SUBTOTAL of Receipts This Page (optional)..... ►

167.12

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 79 OF 213  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. WILLIAM G HILL**

Mailing Address 2935 GLENARYE DRIVE

City State Zip Code  
LINDENHURST IL 60046

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-PRD-Regional Product

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3322.76

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

**Transaction ID : A2013-4572395**

Amount of Each Receipt this Period

133.38

Full Name (Last, First, Middle Initial)

## **B. SHERYL L HODGES**

Mailing Address 2510 OAK AVENUE

City State Zip Code  
NORTHBROOK IL 60062

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

381.64

Date of Receipt

M M / D D / Y Y Y Y Y  
12 13 2013

**Transaction ID : A2013-4523752**

Amount of Each Receipt this Period

15.28

Full Name (Last, First, Middle Initial)

## **C. SHERYL L HODGES**

Mailing Address 2510 OAK AVENUE

City State Zip Code  
NORTHBROOK IL 60062

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

396.92

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

**Transaction ID : A2013-4572476**

Amount of Each Receipt this Period

15.28

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

163.94

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 80 OF 213

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. ROBERT J HOLDEN

Mailing Address 3012 Canton View Walk

City State Zip Code  
 Marietta GA 30068

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

237.47

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 12 13 2013

Transaction ID : A2013-4523649

Amount of Each Receipt this Period

9.54

Full Name (Last, First, Middle Initial)

B. ROBERT J HOLDEN

Mailing Address 3012 Canton View Walk

City State Zip Code  
 Marietta GA 30068

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.01

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 12 27 2013

Transaction ID : A2013-4572373

Amount of Each Receipt this Period

9.54

Full Name (Last, First, Middle Initial)

C. LINDA M HONOUR

Mailing Address 464 Washington Road

City State Zip Code  
 Lake Forest IL 60045

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ATO-Prog Mgmt Office

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1153.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 12 13 2013

Transaction ID : A2013-4523882

Amount of Each Receipt this Period

46.14

SUBTOTAL of Receipts This Page (optional)..... ►

65.22

TOTAL This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 81 OF 213

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. LINDA M HONOUR

Mailing Address 464 Washington Road

City

Lake Forest

State

IL

Zip Code

60045

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ATO-Prog Mgmt Office

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1199.64

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2013

Transaction ID : A2013-4572606

Amount of Each Receipt this Period

46.14

Full Name (Last, First, Middle Initial)

B. MARY L HUBER

Mailing Address 1532 NORTH BELMONT AVE.

City

ARLINGTON HTS.

State

IL

Zip Code

60004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

HR-Communications-Directo

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

516.35

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

Transaction ID : A2013-4523828

Amount of Each Receipt this Period

20.69

Full Name (Last, First, Middle Initial)

C. MARY L HUBER

Mailing Address 1532 NORTH BELMONT AVE.

City

ARLINGTON HTS.

State

IL

Zip Code

60004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

HR-Communications-Directo

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

537.04

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2013

Transaction ID : A2013-4572552

Amount of Each Receipt this Period

20.69

SUBTOTAL of Receipts This Page (optional)..... ►

87.52

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 82 OF 213  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. MICHAEL S HURLEY**

Mailing Address 1225 N. BURGANDY TRAIL

City State Zip Code  
**JACKSONVILLE FL 32259**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

**Allstate Insurance Company**

Occupation

**Field Administration Dire**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**539.07**

Date of Receipt

**12 / 13 / 2013**

**Transaction ID : A2013-4523660**

Amount of Each Receipt this Period

**21.75**

Full Name (Last, First, Middle Initial)

**B. MICHAEL S HURLEY**

Mailing Address 1225 N. BURGANDY TRAIL

City State Zip Code  
**JACKSONVILLE FL 32259**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

**Allstate Insurance Company**

Occupation

**Field Administration Dire**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**560.82**

Date of Receipt

**12 / 27 / 2013**

**Transaction ID : A2013-4572384**

Amount of Each Receipt this Period

**21.75**

Full Name (Last, First, Middle Initial)

**C. STEPHEN L IHM**

Mailing Address 21558 W GOLDFINCH CT

City State Zip Code  
**KILDEER IL 60047**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

**Allstate Insurance Company**

Occupation

**VP-LGL-Corporate Law**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**1398.61**

Date of Receipt

**12 / 13 / 2013**

**Transaction ID : A2013-4523749**

Amount of Each Receipt this Period

**56.38**

**SUBTOTAL** of Receipts This Page (optional)..... ►

**99.88**

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 83 OF 213  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. STEPHEN L IHM**

Mailing Address 21558 W GOLDFINCH CT

City State Zip Code  
 KILDEER IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Allstate Insurance Company

Occupation  
 VP-LGL-Corporate Law

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1454.99

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

**Transaction ID : A2013-4572473**

Amount of Each Receipt this Period

56.38

Full Name (Last, First, Middle Initial)

**B. MARIANO A IMBARRATO**

Mailing Address 10825 CHUCER DRIVE

City State Zip Code  
 WILLOW SPRINGS IL 60480

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Allstate Insurance Company

Occupation  
 Vice PresidentCapital PI

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

567.28

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

**Transaction ID : A2013-4523737**

Amount of Each Receipt this Period

47.43

Full Name (Last, First, Middle Initial)

**C. MARIANO A IMBARRATO**

Mailing Address 10825 CHUCER DRIVE

City State Zip Code  
 WILLOW SPRINGS IL 60480

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Allstate Insurance Company

Occupation  
 Vice PresidentCapital PI

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

614.71

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

**Transaction ID : A2013-4572461**

Amount of Each Receipt this Period

47.43

**SUBTOTAL** of Receipts This Page (optional)..... ►

151.24

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. LYNNE A IVERSON**

Mailing Address 890 BLAZING STAR TRAIL

City State Zip Code  
 CARY IL 60013

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Product Operations Senior

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

799.50

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

**Transaction ID : A2013-4523728**

Amount of Each Receipt this Period

31.98

Full Name (Last, First, Middle Initial)

**B. LYNNE A IVERSON**

Mailing Address 890 BLAZING STAR TRAIL

City State Zip Code  
 CARY IL 60013

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Product Operations Senior

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

831.48

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

**Transaction ID : A2013-4572452**

Amount of Each Receipt this Period

31.98

Full Name (Last, First, Middle Initial)

**C. BOB A JACKSON**

Mailing Address 226 Maison Court

City State Zip Code  
 Altamonte Springs FL 32714

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Regional Sales Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

576.73

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

**Transaction ID : A2013-4523859**

Amount of Each Receipt this Period

23.15

**SUBTOTAL** of Receipts This Page (optional)..... ►

87.11

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. BOB A JACKSON**

Mailing Address 226 Maison Court

City

Altamonte Springs

State

FL

Zip Code

32714

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Regional Sales Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

599.88

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2013

**Transaction ID : A2013-4572583**

Amount of Each Receipt this Period

23.15

Full Name (Last, First, Middle Initial)

**B. CRAIG A JAMES**

Mailing Address 235 HEATHER AVE

City

GRAYSLAKE

State

IL

Zip Code

60030

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Six Sigma-Expert

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.34

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523803**

Amount of Each Receipt this Period

13.92

Full Name (Last, First, Middle Initial)

**C. CRAIG A JAMES**

Mailing Address 235 HEATHER AVE

City

GRAYSLAKE

State

IL

Zip Code

60030

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Six Sigma-Expert

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.26

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2013

**Transaction ID : A2013-4572527**

Amount of Each Receipt this Period

13.92

**SUBTOTAL** of Receipts This Page (optional)..... ►

50.99

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. JAMES C JAMIESON**

Mailing Address 24160 North Beach Dr

City State Zip Code  
Cary IL 60013

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SPS-Strategic Alliance-Di

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

994.49

Date of Receipt

M M / D D / Y Y Y Y Y  
12 13 2013

**Transaction ID : A2013-4523711**

Amount of Each Receipt this Period

39.92

Full Name (Last, First, Middle Initial)

**B. JAMES C JAMIESON**

Mailing Address 24160 North Beach Dr

City State Zip Code  
Cary IL 60013

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SPS-Strategic Alliance-Di

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1034.41

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

**Transaction ID : A2013-4572435**

Amount of Each Receipt this Period

39.92

Full Name (Last, First, Middle Initial)

**C. Jerry A Johnson**

Mailing Address 5233 Tree Way Lane South

City State Zip Code  
Jacksonville FL 32258

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

AWD-Manager-Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.57

Date of Receipt

M M / D D / Y Y Y Y Y  
12 13 2013

**Transaction ID : A2013-4523907**

Amount of Each Receipt this Period

16.89

**SUBTOTAL** of Receipts This Page (optional)..... ►

96.73

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. Jerry A Johnson**

Mailing Address 5233 Tree Way Lane South

City

Jacksonville

State

FL

Zip Code

32258

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

AWD-Manager-Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

236.46

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2013

**Transaction ID : A2013-4572630**

Amount of Each Receipt this Period

16.89

Full Name (Last, First, Middle Initial)

**B. JAMES W JONSKE**

Mailing Address 1217 BARCLAY CIRCLE

City

BARRINGTON

State

IL

Zip Code

60010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-PRD-Standard Auto

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

443.64

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523815**

Amount of Each Receipt this Period

17.87

Full Name (Last, First, Middle Initial)

**C. JAMES W JONSKE**

Mailing Address 1217 BARCLAY CIRCLE

City

BARRINGTON

State

IL

Zip Code

60010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-PRD-Standard Auto

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.51

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2013

**Transaction ID : A2013-4572539**

Amount of Each Receipt this Period

17.87

**SUBTOTAL** of Receipts This Page (optional)..... ►

52.63

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. Marcia Kaminsky**

Mailing Address 2634 North Wayne

City State Zip Code  
 Chicago IL 60614

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-CR-Corporate Communic

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1787.56

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

**Transaction ID : A2013-4523901**

Amount of Each Receipt this Period

71.85

Full Name (Last, First, Middle Initial)

**B. Marcia Kaminsky**

Mailing Address 2634 North Wayne

City State Zip Code  
 Chicago IL 60614

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-CR-Corporate Communic

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1859.41

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

**Transaction ID : A2013-4572625**

Amount of Each Receipt this Period

71.85

Full Name (Last, First, Middle Initial)

**C. JOHN A KANE**

Mailing Address 2180 Trailblazer Way

City State Zip Code  
 Castle Rock CO 80109

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-SAL-Field Vice Preside

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

604.28

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

**Transaction ID : A2013-4523628**

Amount of Each Receipt this Period

24.29

**SUBTOTAL** of Receipts This Page (optional)..... ►

167.99

**TOTAL** This Period (last page this line number only)..... ►



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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

**A. JOHN A KANE**

Mailing Address 2180 Trailblazer Way

City State Zip Code  
Castle Rock CO 80109

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-SAL-Field Vice Preside

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

628.57

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

Transaction ID : A2013-4572352

Amount of Each Receipt this Period

24.29

Full Name (Last, First, Middle Initial)

**B. TIMOTHY M KATHRENS**

Mailing Address 703 HIGHLAND CT

City State Zip Code  
GRAYSLAKE IL 60030

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

446.30

Date of Receipt

M M / D D / Y Y Y Y Y  
12 13 2013

Transaction ID : A2013-4523821

Amount of Each Receipt this Period

17.94

Full Name (Last, First, Middle Initial)

**C. TIMOTHY M KATHRENS**

Mailing Address 703 HIGHLAND CT

City State Zip Code  
GRAYSLAKE IL 60030

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

464.24

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

Transaction ID : A2013-4572545

Amount of Each Receipt this Period

17.94

SUBTOTAL of Receipts This Page (optional)..... ►

60.17

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. Wilford J Kavanaugh**

Mailing Address 7 Open Parkway North

City State Zip Code  
Hawthorn Woods IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-AF-Pres. Allstate Fin

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1396.25

Date of Receipt

M M / D D / Y Y Y Y Y  
12 13 2013

**Transaction ID : A2013-4523904**

Amount of Each Receipt this Period

55.85

Full Name (Last, First, Middle Initial)

**B. Wilford J Kavanaugh**

Mailing Address 7 Open Parkway North

City State Zip Code  
Hawthorn Woods IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-AF-Pres. Allstate Fin

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1452.10

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

**Transaction ID : A2013-4572627**

Amount of Each Receipt this Period

55.85

Full Name (Last, First, Middle Initial)

**C. Robert A Kellman**

Mailing Address 1904 W. Schoot

City State Zip Code  
Chicago IL 60657

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corp Rel Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.67

Date of Receipt

M M / D D / Y Y Y Y Y  
12 13 2013

**Transaction ID : A2013-4523910**

Amount of Each Receipt this Period

6.98

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

118.68

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

**A. Robert A Kellman**

Mailing Address 1904 W. Schoot

City State Zip Code  
 Chicago IL 60657

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corp Rel Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.65

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

Transaction ID : A2013-4572633

Amount of Each Receipt this Period

6.98

Full Name (Last, First, Middle Initial)

**B. CHRISTOPHER R KIAH**

Mailing Address 221 BRAMPTON LN

City State Zip Code  
 LAKE FOREST IL 60045

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SOG-Protection Progra

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1404.93

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

Transaction ID : A2013-4523613

Amount of Each Receipt this Period

56.46

Full Name (Last, First, Middle Initial)

**C. CHRISTOPHER R KIAH**

Mailing Address 221 BRAMPTON LN

City State Zip Code  
 LAKE FOREST IL 60045

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SOG-Protection Progra

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1461.39

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

Transaction ID : A2013-4572337

Amount of Each Receipt this Period

56.46

SUBTOTAL of Receipts This Page (optional)..... ►

119.90

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

**A. CURTIS L KIBLER**

Mailing Address 1332 BAY MEADOWS DR

City State Zip Code  
 BARTLETT IL 60103

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1089.81

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

Transaction ID : A2013-4523712

Amount of Each Receipt this Period

43.67

Full Name (Last, First, Middle Initial)

**B. CURTIS L KIBLER**

Mailing Address 1332 BAY MEADOWS DR

City State Zip Code  
 BARTLETT IL 60103

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1133.48

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

Transaction ID : A2013-4572436

Amount of Each Receipt this Period

43.67

Full Name (Last, First, Middle Initial)

**C. BARBARA L KILROY**

Mailing Address 1036 VINEYARD DRIVE

City State Zip Code  
 GURNEE IL 60031

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Finance Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.86

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

Transaction ID : A2013-4523664

Amount of Each Receipt this Period

20.89

SUBTOTAL of Receipts This Page (optional)..... ►

108.23

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. BARBARA L KILROY

Mailing Address 1036 VINEYARD DRIVE

City State Zip Code  
 GURNEE IL 60031

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Finance Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

541.75

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

Transaction ID : A2013-4572388

Amount of Each Receipt this Period

20.89

Full Name (Last, First, Middle Initial)

B. ANNE I KIM

Mailing Address 1580 SHERMAN AVE # 201

City State Zip Code  
 EVANSTON IL 60201

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

527.21

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

Transaction ID : A2013-4523799

Amount of Each Receipt this Period

21.20

Full Name (Last, First, Middle Initial)

C. ANNE I KIM

Mailing Address 1580 SHERMAN AVE # 201

City State Zip Code  
 EVANSTON IL 60201

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

548.41

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

Transaction ID : A2013-4572523

Amount of Each Receipt this Period

21.20

SUBTOTAL of Receipts This Page (optional)..... ►

63.29

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Stephen B King

Mailing Address 1620 Monterey

City State Zip Code  
 Glenview IL 60026

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-HR-Leadership &amp; Talent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

394.55

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

Transaction ID : A2013-4523890

Amount of Each Receipt this Period

30.35

Full Name (Last, First, Middle Initial)

B. Stephen B King

Mailing Address 1620 Monterey

City State Zip Code  
 Glenview IL 60026

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-HR-Leadership &amp; Talent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

424.90

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

Transaction ID : A2013-4572614

Amount of Each Receipt this Period

30.35

Full Name (Last, First, Middle Initial)

C. Brian D Klemstein

Mailing Address 608 Haddon Circle

City State Zip Code  
 Vernon Hills IL 60061

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Unclassified Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

389.48

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

Transaction ID : A2013-4523887

Amount of Each Receipt this Period

15.66

SUBTOTAL of Receipts This Page (optional)..... ►

76.36

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. Brian D Klemstein**

Mailing Address 608 Haddon Circle

City State Zip Code  
 Vernon Hills IL 60061

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Unclassified Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.14

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

**Transaction ID : A2013-4572611**

Amount of Each Receipt this Period

15.66

Full Name (Last, First, Middle Initial)

**B. STEVEN T KLODZINSKI**

Mailing Address 18699 W. State Line Road

City State Zip Code  
 Antioch IL 60002

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Finance Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

337.85

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

**Transaction ID : A2013-4523762**

Amount of Each Receipt this Period

13.55

Full Name (Last, First, Middle Initial)

**C. STEVEN T KLODZINSKI**

Mailing Address 18699 W. State Line Road

City State Zip Code  
 Antioch IL 60002

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Finance Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

351.40

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

**Transaction ID : A2013-4572486**

Amount of Each Receipt this Period

13.55

**SUBTOTAL** of Receipts This Page (optional)..... ►

42.76

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
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(check only one)

☒ 11a    ☐ 11b    ☐ 11c    ☐ 12  
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

**A. TIMOTHY L KNAPP**

Mailing Address 132 FARMSTEAD CIRCLE

City  
LEBANONState      Zip Code  
PA              17042FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

554.27

Date of Receipt

 M M / D D / Y Y Y Y  
 12 / 13 / 2013

Transaction ID : A2013-4523653

Amount of Each Receipt this Period

22.25

Full Name (Last, First, Middle Initial)

**B. TIMOTHY L KNAPP**

Mailing Address 132 FARMSTEAD CIRCLE

City  
LEBANONState      Zip Code  
PA              17042FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

576.52

Date of Receipt

 M M / D D / Y Y Y Y  
 12 / 27 / 2013

Transaction ID : A2013-4572377

Amount of Each Receipt this Period

22.25

Full Name (Last, First, Middle Initial)

**C. JEFFREY D KNIPP**

Mailing Address 2050 GLENDALE AVE

City  
NORTHBROOKState      Zip Code  
IL              60062FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Operations Director

Receipt For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

929.84

Date of Receipt

 M M / D D / Y Y Y Y  
 12 / 13 / 2013

Transaction ID : A2013-4523852

Amount of Each Receipt this Period

37.39

SUBTOTAL of Receipts This Page (optional)..... ►

81.89

TOTAL This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. JEFFREY D KNIPP**

Mailing Address 2050 GLENDALE AVE

City State Zip Code  
 NORTHBROOK IL 60062

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Operations Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

967.23

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

**Transaction ID : A2013-4572576**

Amount of Each Receipt this Period

37.39

Full Name (Last, First, Middle Initial)

**B. DANIEL P KRAFT**

Mailing Address 1884 S. WARBLER CT.

City State Zip Code  
 LIBERTYVILLE IL 60048

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

MICR-PSID Vehicle-Directo

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.15

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

**Transaction ID : A2013-4523687**

Amount of Each Receipt this Period

12.46

Full Name (Last, First, Middle Initial)

**C. DANIEL P KRAFT**

Mailing Address 1884 S. WARBLER CT.

City State Zip Code  
 LIBERTYVILLE IL 60048

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

MICR-PSID Vehicle-Directo

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

422.61

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

**Transaction ID : A2013-4572411**

Amount of Each Receipt this Period

12.46

**SUBTOTAL** of Receipts This Page (optional)..... ►

62.31

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. JAIKRISHNA KUCHIMANCHI**

Mailing Address 4513 Jenna Rd

City

Glenview

State

IL

Zip Code

60025

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

AFT-Manager-Sr Manager

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

877.94

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523789**

Amount of Each Receipt this Period

35.46

Full Name (Last, First, Middle Initial)

**B. JAIKRISHNA KUCHIMANCHI**

Mailing Address 4513 Jenna Rd

City

Glenview

State

IL

Zip Code

60025

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

AFT-Manager-Sr Manager

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

913.40

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2013

**Transaction ID : A2013-4572513**

Amount of Each Receipt this Period

35.46

Full Name (Last, First, Middle Initial)

**C. J. Wayne W KULLMAN**

Mailing Address 2005 Henley St.

City

GLENVIEW

State

IL

Zip Code

60025

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-SOG-Agency Sales Cross

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

595.85

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523680**

Amount of Each Receipt this Period

23.96

**SUBTOTAL** of Receipts This Page (optional)..... ►

94.88

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. J. Wayne W KULLMAN**

Mailing Address 2005 Henley St.

City State Zip Code  
 GLENVIEW IL 60025

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-SOG-Agency Sales Cross

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

619.81

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

**Transaction ID : A2013-4572404**

Amount of Each Receipt this Period

23.96

Full Name (Last, First, Middle Initial)

**B. PAUL D LANSPA**

Mailing Address 3819 PARSONS ROAD

City State Zip Code  
 CARPENTERSVILLE IL 60110

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Division Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

449.92

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

**Transaction ID : A2013-4523855**

Amount of Each Receipt this Period

28.12

Full Name (Last, First, Middle Initial)

**C. PAUL D LANSPA**

Mailing Address 3819 PARSONS ROAD

City State Zip Code  
 CARPENTERSVILLE IL 60110

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Division Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

478.04

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

**Transaction ID : A2013-4572579**

Amount of Each Receipt this Period

28.12

**SUBTOTAL** of Receipts This Page (optional)..... ►

80.20

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. JEFFREY F LEASENDALE**

Mailing Address 422 RIDGECREST RD NE

City State Zip Code  
 ATLANTA GA 30307

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Lead Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.47

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

**Transaction ID : A2013-4523645**

Amount of Each Receipt this Period

15.08

Full Name (Last, First, Middle Initial)

**B. JEFFREY F LEASENDALE**

Mailing Address 422 RIDGECREST RD NE

City State Zip Code  
 ATLANTA GA 30307

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Lead Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.55

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

**Transaction ID : A2013-4572369**

Amount of Each Receipt this Period

15.08

Full Name (Last, First, Middle Initial)

**C. SUSAN L LEES**

Mailing Address 1705 DARTMOUTH LN

City State Zip Code  
 DEERFIELD IL 60015

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-LGL-Gen'l Counsel & C

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1778.79

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

**Transaction ID : A2013-4523612**

Amount of Each Receipt this Period

102.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

132.16

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. SUSAN L LEES**

Mailing Address 1705 DARTMOUTH LN

City State Zip Code  
 DEERFIELD IL 60015

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-LGL-Gen'l Counsel & C

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1880.79

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

**Transaction ID : A2013-4572336**

Amount of Each Receipt this Period

102.00

Full Name (Last, First, Middle Initial)

## **B. GARY L LEVINE**

Mailing Address 16340 W. Arlington Drive

City State Zip Code  
 Libertyville IL 60048

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

484.37

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

**Transaction ID : A2013-4523837**

Amount of Each Receipt this Period

19.51

Full Name (Last, First, Middle Initial)

## **C. GARY L LEVINE**

Mailing Address 16340 W. Arlington Drive

City State Zip Code  
 Libertyville IL 60048

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

503.88

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

**Transaction ID : A2013-4572561**

Amount of Each Receipt this Period

19.51

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

141.02

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. CHARLES M LITTLE**

Mailing Address 20 STONEGATE POINT

City

HOT SPRINGS

State

AR

Zip Code

71913

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

FSL - Growth

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

347.26

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523836**

Amount of Each Receipt this Period

13.89

Full Name (Last, First, Middle Initial)

**B. CHARLES M LITTLE**

Mailing Address 20 STONEGATE POINT

City

HOT SPRINGS

State

AR

Zip Code

71913

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

FSL - Growth

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

361.15

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2013

**Transaction ID : A2013-4572560**

Amount of Each Receipt this Period

13.89

Full Name (Last, First, Middle Initial)

**c. Peter G Logotheitis**

Mailing Address 2326 Indian Ridge Drive

City

Glenview

State

IL

Zip Code

60026

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-ATO-Bus Prtn-Claims

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1536.90

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523905**

Amount of Each Receipt this Period

61.80

**SUBTOTAL** of Receipts This Page (optional)..... ►

89.58

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. Peter G Logothesis**

Mailing Address 2326 Indian Ridge Drive

City State Zip Code  
 Glenview IL 60026

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-ATO-Bus Prtn-Claims

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1598.70

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

**Transaction ID : A2013-4572628**

Amount of Each Receipt this Period

61.80

Full Name (Last, First, Middle Initial)

**B. RHONDA J LOWE**

Mailing Address 2568 Carrington Way

City State Zip Code  
 Frederick MD 21702

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Market Claim Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

358.43

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

**Transaction ID : A2013-4523804**

Amount of Each Receipt this Period

15.06

Full Name (Last, First, Middle Initial)

**C. RHONDA J LOWE**

Mailing Address 2568 Carrington Way

City State Zip Code  
 Frederick MD 21702

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Market Claim Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

373.49

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

**Transaction ID : A2013-4572528**

Amount of Each Receipt this Period

15.06

**SUBTOTAL** of Receipts This Page (optional)..... ►

91.92

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. GREGORY J LUCETT**

Mailing Address P.O. BOX 9242

City  
GLENDALE

State Zip Code  
CA 91226

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Managing Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

888.55

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523874**

Amount of Each Receipt this Period

35.76

Full Name (Last, First, Middle Initial)

**B. GREGORY J LUCETT**

Mailing Address P.O. BOX 9242

City  
GLENDALE

State Zip Code  
CA 91226

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Managing Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

956.49

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2013

**Transaction ID : A2013-4572598**

Amount of Each Receipt this Period

67.94

Full Name (Last, First, Middle Initial)

**C. COREY C LUECHT**

Mailing Address 843 Spring Cove Dr

City  
SCHAUMBURG

State Zip Code  
IL 60193

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Real Estate and Facilitie

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

558.46

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523761**

Amount of Each Receipt this Period

22.38

**SUBTOTAL** of Receipts This Page (optional)..... ►

126.08

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. COREY C LUECHT**

Mailing Address 843 Spring Cove Dr

City State Zip Code  
 SCHAUMBURG IL 60193

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Real Estate and Facilitie

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

580.84

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

**Transaction ID : A2013-4572485**

Amount of Each Receipt this Period

22.38

Full Name (Last, First, Middle Initial)

## **B. BENJAMIN E LUMICAO**

Mailing Address 9655 Woods Drive Unit 708

City State Zip Code  
 Skokie IL 60077

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

869.17

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

**Transaction ID : A2013-4523779**

Amount of Each Receipt this Period

34.83

Full Name (Last, First, Middle Initial)

## **C. BENJAMIN E LUMICAO**

Mailing Address 9655 Woods Drive Unit 708

City State Zip Code  
 Skokie IL 60077

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

904.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

**Transaction ID : A2013-4572503**

Amount of Each Receipt this Period

34.83

**SUBTOTAL** of Receipts This Page (optional)..... ►

92.04

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. Katherine A Mabe**

Mailing Address 2750 Commons Drive

City State Zip Code  
 Glenview IL 60026

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-SAL-Regional Presiden

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2719.15

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

**Transaction ID : A2013-4523902**

Amount of Each Receipt this Period

109.34

Full Name (Last, First, Middle Initial)

**B. Katherine A Mabe**

Mailing Address 2750 Commons Drive

City State Zip Code  
 Glenview IL 60026

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-SAL-Regional Presiden

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2833.66

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

**Transaction ID : A2013-4572626**

Amount of Each Receipt this Period

114.51

Full Name (Last, First, Middle Initial)

**C. DANIEL J MACDONALD**

Mailing Address 2250 RIDGETRAIL DR

City State Zip Code  
 CASTLE ROCK CO 80104

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

FSL - Growth

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

561.21

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

**Transaction ID : A2013-4523827**

Amount of Each Receipt this Period

22.45

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

246.30

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. DANIEL J MACDONALD**

Mailing Address 2250 RIDGETRAIL DR

City State Zip Code  
 CASTLE ROCK CO 80104

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

FSL - Growth

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

583.66

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

**Transaction ID : A2013-4572551**

Amount of Each Receipt this Period

22.45

Full Name (Last, First, Middle Initial)

**B. KENNETH P MARCOTTE**

Mailing Address 2311 HAVERTON DR

City State Zip Code  
 MUNDELEIN IL 60060

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Accounting Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

565.86

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

**Transaction ID : A2013-4523722**

Amount of Each Receipt this Period

23.65

Full Name (Last, First, Middle Initial)

**C. KENNETH P MARCOTTE**

Mailing Address 2311 HAVERTON DR

City State Zip Code  
 MUNDELEIN IL 60060

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Accounting Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

589.51

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

**Transaction ID : A2013-4572446**

Amount of Each Receipt this Period

23.65

**SUBTOTAL** of Receipts This Page (optional)..... ►

69.75

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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(check only one)

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. James L Martonik Jr.**

Mailing Address 16720 6th Ave. W.

City State Zip Code  
 Lynnwood WA 98037

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Technical Claim Process S

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.66

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

**Transaction ID : A2013-4523865**

Amount of Each Receipt this Period

9.25

Full Name (Last, First, Middle Initial)

**B. James L Martonik Jr.**

Mailing Address 16720 6th Ave. W.

City State Zip Code  
 Lynnwood WA 98037

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Technical Claim Process S

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.91

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

**Transaction ID : A2013-4572589**

Amount of Each Receipt this Period

9.25

Full Name (Last, First, Middle Initial)

**C. Rhonda J Masser**

Mailing Address 4807 Wildwood Dr

City State Zip Code  
 McHenry IL 60051

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

HR-Client Partnership-Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

503.29

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

**Transaction ID : A2013-4523701**

Amount of Each Receipt this Period

20.29

**SUBTOTAL** of Receipts This Page (optional)..... ►

38.79

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

**A. Rhonda J Masser**

Mailing Address 4807 Wildwood Dr

City State Zip Code  
 McHenry IL 60051

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

HR-Client Partnership-Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

523.58

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

Transaction ID : A2013-4572425

Amount of Each Receipt this Period

20.29

Full Name (Last, First, Middle Initial)

**B. JOHN R MATHEWS**

Mailing Address 401 E NORTH AVENUE

City State Zip Code  
 LAKE BLUFF IL 60044

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

559.49

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

Transaction ID : A2013-4523780

Amount of Each Receipt this Period

22.43

Full Name (Last, First, Middle Initial)

**C. JOHN R MATHEWS**

Mailing Address 401 E NORTH AVENUE

City State Zip Code  
 LAKE BLUFF IL 60044

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

581.92

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

Transaction ID : A2013-4572504

Amount of Each Receipt this Period

22.43

SUBTOTAL of Receipts This Page (optional)..... ►

65.15

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. JOHN A MC LAUGHLIN**

Mailing Address 25748 N. Stoney Kirk Ct.

City State Zip Code  
Hawthorn Woods IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1052.86

Date of Receipt

M M / D D / Y Y Y Y Y  
12 13 2013

**Transaction ID : A2013-4523735**

Amount of Each Receipt this Period

42.19

Full Name (Last, First, Middle Initial)

**B. JOHN A MC LAUGHLIN**

Mailing Address 25748 N. Stoney Kirk Ct.

City State Zip Code  
Hawthorn Woods IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1095.05

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

**Transaction ID : A2013-4572459**

Amount of Each Receipt this Period

42.19

Full Name (Last, First, Middle Initial)

**C. SALLY J MCCARTHY**

Mailing Address 1036 ROLLING PASS

City State Zip Code  
GLENVIEW IL 60025

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Sales Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

615.50

Date of Receipt

M M / D D / Y Y Y Y Y  
12 13 2013

**Transaction ID : A2013-4523765**

Amount of Each Receipt this Period

24.62

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

109.00

**SCHEDULE A (FEC Form 3X)****ITEMIZED RECEIPTS**Use separate schedule(s)  
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. SALLY J MCCARTHY**

Mailing Address 1036 ROLLING PASS

City  
GLENVIEWState  
ILZip Code  
60025FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Sales Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.12

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	27	/	2013

**Transaction ID : A2013-4572489**

Amount of Each Receipt this Period

24.62

Full Name (Last, First, Middle Initial)

**B. LINDA H MCCLELLAN**

Mailing Address 5561 Hilltop Lane

City  
LibertyvilleState  
ILZip Code  
60048FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Market Claim Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

388.21

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	13	/	2013

**Transaction ID : A2013-4523840**

Amount of Each Receipt this Period

16.00

Full Name (Last, First, Middle Initial)

**C. LINDA H MCCLELLAN**

Mailing Address 5561 Hilltop Lane

City  
LibertyvilleState  
ILZip Code  
60048FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Market Claim Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

404.21

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	27	/	2013

**Transaction ID : A2013-4572564**

Amount of Each Receipt this Period

16.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

56.62

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. SCOTT A MCCONNELL**

Mailing Address 748 FOXMOOR LANE

City

LAKE ZURICH

State

IL

Zip Code

60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

INV-IT Capital Markets-Di

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.60

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523699**

Amount of Each Receipt this Period

19.91

Full Name (Last, First, Middle Initial)

**B. SCOTT A MCCONNELL**

Mailing Address 748 FOXMOOR LANE

City

LAKE ZURICH

State

IL

Zip Code

60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

INV-IT Capital Markets-Di

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

443.51

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2013

**Transaction ID : A2013-4572423**

Amount of Each Receipt this Period

19.91

Full Name (Last, First, Middle Initial)

**C. JOSEPH P MCCORMICK**

Mailing Address 808 PARKDALE CT.

City

SOUTHLAKE

State

TX

Zip Code

76092

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corp Rel Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

473.75

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523662**

Amount of Each Receipt this Period

18.95

**SUBTOTAL** of Receipts This Page (optional)..... ►

58.77

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. JOSEPH P MCCORMICK**

Mailing Address 808 PARKDALE CT.

City  
SOUTHLAKE

State Zip Code  
TX 76092

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Corp Rel Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

492.70

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

**Transaction ID : A2013-4572386**

Amount of Each Receipt this Period

18.95

Full Name (Last, First, Middle Initial)

**B. LEE L McElroy**

Mailing Address 7808 ROYAL SYDNEY DR

City  
GAINESVILLE

State Zip Code  
VA 20155

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Regional Financial Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

409.09

Date of Receipt

M M / D D / Y Y Y Y Y  
12 13 2013

**Transaction ID : A2013-4523870**

Amount of Each Receipt this Period

16.45

Full Name (Last, First, Middle Initial)

**C. LEE L McElroy**

Mailing Address 7808 ROYAL SYDNEY DR

City  
GAINESVILLE

State Zip Code  
VA 20155

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Regional Financial Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.54

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

**Transaction ID : A2013-4572594**

Amount of Each Receipt this Period

16.45

**SUBTOTAL** of Receipts This Page (optional)..... ►

51.85

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. MARK A MCGILLIVRAY**

Mailing Address 1028 PORTSMOUTH CIRCLE

City State Zip Code  
 GURNEE IL 60031

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-CLM-Centralized Servi

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

789.24

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

**Transaction ID : A2013-4523864**

Amount of Each Receipt this Period

31.71

Full Name (Last, First, Middle Initial)

**B. MARK A MCGILLIVRAY**

Mailing Address 1028 PORTSMOUTH CIRCLE

City State Zip Code  
 GURNEE IL 60031

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-CLM-Centralized Servi

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

820.95

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

**Transaction ID : A2013-4572588**

Amount of Each Receipt this Period

31.71

Full Name (Last, First, Middle Initial)

**C. EVA M MCINTEE**

Mailing Address 11 Larkspur Drive

City State Zip Code  
 Smithtown NY 11787

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-SAL-Field Vice Preside

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1130.50

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

**Transaction ID : A2013-4523862**

Amount of Each Receipt this Period

45.40

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

108.82

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. EVA M MCINTEE**

Mailing Address 11 Larkspur Drive

City State Zip Code  
Smithtown NY 11787

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-SAL-Field Vice Preside

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1175.90

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

**Transaction ID : A2013-4572586**

Amount of Each Receipt this Period

45.40

Full Name (Last, First, Middle Initial)

## **B. JEFFREY J MCRAE**

Mailing Address 83 Arcadia Lane

City State Zip Code  
LAKE ZURICH IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-PF-Strategy & Plannin

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

697.48

Date of Receipt

M M / D D / Y Y Y Y Y  
12 13 2013

**Transaction ID : A2013-4523688**

Amount of Each Receipt this Period

28.07

Full Name (Last, First, Middle Initial)

## **C. JEFFREY J MCRAE**

Mailing Address 83 Arcadia Lane

City State Zip Code  
LAKE ZURICH IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-PF-Strategy & Plannin

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

725.55

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

**Transaction ID : A2013-4572412**

Amount of Each Receipt this Period

28.07

**SUBTOTAL** of Receipts This Page (optional)..... ►

101.54

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. Jesse E Merten**

Mailing Address 3311 Brook Rd.

City State Zip Code  
 Highland Park IL 60035

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-AF-Finance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1648.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

**Transaction ID : A2013-4523906**

Amount of Each Receipt this Period

66.46

Full Name (Last, First, Middle Initial)

**B. Jesse E Merten**

Mailing Address 3311 Brook Rd.

City State Zip Code  
 Highland Park IL 60035

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-AF-Finance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1714.46

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

**Transaction ID : A2013-4572629**

Amount of Each Receipt this Period

66.46

Full Name (Last, First, Middle Initial)

**C. HANS H METZINGER**

Mailing Address 407 E. CLAIRE LANE

City State Zip Code  
 PROSPECT HTS IL 60070

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Sales Support Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

459.87

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

**Transaction ID : A2013-4523755**

Amount of Each Receipt this Period

18.51

**SUBTOTAL** of Receipts This Page (optional)..... ►

151.43

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. HANS H METZINGER**

Mailing Address 407 E. CLAIRE LANE

City State Zip Code  
PROSPECT HTS IL 60070

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Sales Support Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

478.38

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

**Transaction ID : A2013-4572479**

Amount of Each Receipt this Period

18.51

Full Name (Last, First, Middle Initial)

**B. RYAN A MICHEL**

Mailing Address 409 E. CHURCH ST.

City State Zip Code  
ELMHURST IL 60126

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Sr Dir Canada Prod & Risk

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.44

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

**Transaction ID : A2013-4572524**

Amount of Each Receipt this Period

7.91

Full Name (Last, First, Middle Initial)

**C. JOHN W MICHELI**

Mailing Address 300 E. Church St.

City State Zip Code  
LIBERTYVILLE IL 60048

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SOG-Protection Progra

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

518.69

Date of Receipt

M M / D D / Y Y Y Y Y  
12 13 2013

**Transaction ID : A2013-4523630**

Amount of Each Receipt this Period

20.87

**SUBTOTAL** of Receipts This Page (optional)..... ►

47.29

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. JOHN W MICHELI**

Mailing Address 300 E. Church St.

City  
LIBERTYVILLE

State Zip Code  
IL 60048

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SOG-Protection Progra

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

539.56

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

**Transaction ID : A2013-4572354**

Amount of Each Receipt this Period

20.87

Full Name (Last, First, Middle Initial)

**B. FREDERICK J MILLER**

Mailing Address 16343 Smith Mountain Lake Parkway

City  
Huddleston

State Zip Code  
VA 24104

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Territorial Sales Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.84

Date of Receipt

M M / D D / Y Y Y Y Y  
12 13 2013

**Transaction ID : A2013-4523698**

Amount of Each Receipt this Period

33.59

Full Name (Last, First, Middle Initial)

**C. FREDERICK J MILLER**

Mailing Address 16343 Smith Mountain Lake Parkway

City  
Huddleston

State Zip Code  
VA 24104

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Territorial Sales Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

834.43

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

**Transaction ID : A2013-4572422**

Amount of Each Receipt this Period

33.59

**SUBTOTAL** of Receipts This Page (optional)..... ►

88.05

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. STEVEN M MILLER**

Mailing Address 1011 Redwood Drive

City State Zip Code  
ALGONQUIN IL 60102

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
Allstate Insurance Company VP-ATO-Bus Prtn-Product O

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.12

Date of Receipt

M M / D D / Y Y Y Y Y  
12 13 2013

**Transaction ID : A2013-4523807**

Amount of Each Receipt this Period

24.42

Full Name (Last, First, Middle Initial)

**B. STEVEN M MILLER**

Mailing Address 1011 Redwood Drive

City State Zip Code  
ALGONQUIN IL 60102

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
Allstate Insurance Company VP-ATO-Bus Prtn-Product O

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

632.54

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

**Transaction ID : A2013-4572531**

Amount of Each Receipt this Period

24.42

Full Name (Last, First, Middle Initial)

**C. AMY B MILLS**

Mailing Address 942 Forest Avenue

City State Zip Code  
Deerfield IL 60015

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
Allstate Insurance Company Risk Mgmt-NCS Integration

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

490.12

Date of Receipt

M M / D D / Y Y Y Y Y  
12 13 2013

**Transaction ID : A2013-4523880**

Amount of Each Receipt this Period

25.31

**SUBTOTAL** of Receipts This Page (optional)..... ►

74.15

**TOTAL** This Period (last page this line number only)..... ►

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. AMY B MILLS**

Mailing Address 942 Forest Avenue

City State Zip Code  
 Deerfield IL 60015

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
 Allstate Insurance Company Risk Mgmt-NCS Integration

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

511.54

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

**Transaction ID : A2013-4572604**

Amount of Each Receipt this Period

21.42

Full Name (Last, First, Middle Initial)

**B. ALLISON MISQUEZ**

Mailing Address 578 Patriot Court

City State Zip Code  
 Gurnee IL 60031

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
 Allstate Insurance Company ATO-Manager-Manager

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

364.87

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

**Transaction ID : A2013-4523869**

Amount of Each Receipt this Period

14.62

Full Name (Last, First, Middle Initial)

**C. ALLISON MISQUEZ**

Mailing Address 578 Patriot Court

City State Zip Code  
 Gurnee IL 60031

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
 Allstate Insurance Company ATO-Manager-Manager

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

379.49

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

**Transaction ID : A2013-4572593**

Amount of Each Receipt this Period

14.62

**SUBTOTAL** of Receipts This Page (optional)..... ►

50.66

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. JAMES R MOSELEY III III**

Mailing Address 1709 Montclair Blvd

City

Brentwood

State

TN

Zip Code

37027

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

HR-Client Partner Field B

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

412.16

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523676**

Amount of Each Receipt this Period

16.58

Full Name (Last, First, Middle Initial)

**B. JAMES R MOSELEY III III**

Mailing Address 1709 Montclair Blvd

City

Brentwood

State

TN

Zip Code

37027

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

HR-Client Partner Field B

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

428.74

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2013

**Transaction ID : A2013-4572400**

Amount of Each Receipt this Period

16.58

Full Name (Last, First, Middle Initial)

**C. MEGHAN O MULVIHILL**

Mailing Address 2445 CHERRY LANE

City

NORTHBROOK

State

IL

Zip Code

60062

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

978.28

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523667**

Amount of Each Receipt this Period

39.27

**SUBTOTAL** of Receipts This Page (optional)..... ►

72.43

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. MEGHAN O MULVIHILL**

Mailing Address 2445 CHERRY LANE

City

NORTHBROOK

State

IL

Zip Code

60062

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1017.55

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2013

**Transaction ID : A2013-4572391**

Amount of Each Receipt this Period

39.27

Full Name (Last, First, Middle Initial)

**B. MICHAEL F MULVIHILL**

Mailing Address 2445 CHERRY LANE

City

NORTHBROOK

State

IL

Zip Code

60062

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1083.53

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523717**

Amount of Each Receipt this Period

43.57

Full Name (Last, First, Middle Initial)

**C. MICHAEL F MULVIHILL**

Mailing Address 2445 CHERRY LANE

City

NORTHBROOK

State

IL

Zip Code

60062

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1127.10

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2013

**Transaction ID : A2013-4572441**

Amount of Each Receipt this Period

43.57

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

126.41

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. MICHAEL A MURPHY**

Mailing Address 1908 N. Silver Lake Road

City State Zip Code  
Arlington Heights IL 60004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1047.86

Date of Receipt

M M / D D / Y Y Y Y Y  
12 13 2013

**Transaction ID : A2013-4523843**

Amount of Each Receipt this Period

41.99

Full Name (Last, First, Middle Initial)

**B. MICHAEL A MURPHY**

Mailing Address 1908 N. Silver Lake Road

City State Zip Code  
Arlington Heights IL 60004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1089.85

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

**Transaction ID : A2013-4572567**

Amount of Each Receipt this Period

41.99

Full Name (Last, First, Middle Initial)

**C. DON J MYKETIAK**

Mailing Address 28W770 HAWTHORNE LANE

City State Zip Code  
WEST CHICAGO IL 60185

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Sr. Manager Accounting/Fi

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

368.43

Date of Receipt

M M / D D / Y Y Y Y Y  
12 13 2013

**Transaction ID : A2013-4523754**

Amount of Each Receipt this Period

14.82

**SUBTOTAL** of Receipts This Page (optional)..... ►

98.80

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. DON J MYKETIAK**

Mailing Address 28W770 HAWTHORNE LANE

City State Zip Code  
 WEST CHICAGO IL 60185

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Sr. Manager Accounting/Fi

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

383.25

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

**Transaction ID : A2013-4572478**

Amount of Each Receipt this Period

14.82

Full Name (Last, First, Middle Initial)

**B. DAVID G NADIG**

Mailing Address 2950 LAKE PLACID

City State Zip Code  
 NORTHBROOK IL 60062

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-LGL-Protection Law

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1625.31

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

**Transaction ID : A2013-4523797**

Amount of Each Receipt this Period

65.41

Full Name (Last, First, Middle Initial)

**C. DAVID G NADIG**

Mailing Address 2950 LAKE PLACID

City State Zip Code  
 NORTHBROOK IL 60062

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-LGL-Protection Law

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1690.72

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

**Transaction ID : A2013-4572521**

Amount of Each Receipt this Period

65.41

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

145.64

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. PATRICK K NOLL**

Mailing Address 22451 THORNBURY CT

City  
DEER PARK

State Zip Code  
IL 60010

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
SVP-LGL-Enterprise Busine

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1527.70

Date of Receipt

M M / D D / Y Y Y Y Y  
12 13 2013

**Transaction ID : A2013-4523845**

Amount of Each Receipt this Period

61.43

Full Name (Last, First, Middle Initial)

**B. PATRICK K NOLL**

Mailing Address 22451 THORNBURY CT

City  
DEER PARK

State Zip Code  
IL 60010

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
SVP-LGL-Enterprise Busine

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1589.13

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

**Transaction ID : A2013-4572569**

Amount of Each Receipt this Period

61.43

Full Name (Last, First, Middle Initial)

**C. THOMAS R NORTON**

Mailing Address 1423 PIONEER COURT

City  
WAUKEGAN

State Zip Code  
IL 60085

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
HR-Client Partnership HO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

799.25

Date of Receipt

M M / D D / Y Y Y Y Y  
12 13 2013

**Transaction ID : A2013-4523790**

Amount of Each Receipt this Period

31.97

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

154.83

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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(check only one)

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. THOMAS R NORTON**

Mailing Address 1423 PIONEER COURT

City State Zip Code  
 WAUKEGAN IL 60085

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

HR-Client Partnership HO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

831.22

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

**Transaction ID : A2013-4572514**

Amount of Each Receipt this Period

31.97

Full Name (Last, First, Middle Initial)

**B. RICHARD C O'BRIEN**

Mailing Address 574 S. COUNTRY RIDGE

City State Zip Code  
 LAKE ZURICH IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Operations Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

539.86

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

**Transaction ID : A2013-4523702**

Amount of Each Receipt this Period

21.69

Full Name (Last, First, Middle Initial)

**C. RICHARD C O'BRIEN**

Mailing Address 574 S. COUNTRY RIDGE

City State Zip Code  
 LAKE ZURICH IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Operations Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

561.55

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

**Transaction ID : A2013-4572426**

Amount of Each Receipt this Period

21.69

**SUBTOTAL** of Receipts This Page (optional)..... ►

75.35

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. JOHN O'MALLEY**

Mailing Address 1816 ASPEN LANE

City State Zip Code  
MOUNT PROSPECT IL 60056

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

HR-Retirement-Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

426.32

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523774**

Amount of Each Receipt this Period

17.08

Full Name (Last, First, Middle Initial)

**B. JOHN O'MALLEY**

Mailing Address 1816 ASPEN LANE

City State Zip Code  
MOUNT PROSPECT IL 60056

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

HR-Retirement-Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

443.40

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2013

**Transaction ID : A2013-4572498**

Amount of Each Receipt this Period

17.08

Full Name (Last, First, Middle Initial)

**C. MICHAEL P O'SHEA**

Mailing Address 2505 NEWPORT DRIVE

City State Zip Code  
NAPERVILLE IL 60565

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

FSL - Growth

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

684.32

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523638**

Amount of Each Receipt this Period

27.47

**SUBTOTAL** of Receipts This Page (optional)..... ►

61.63

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. MICHAEL P O'SHEA

Mailing Address 2505 NEWPORT DRIVE

City	State	Zip Code
NAPERVILLE	IL	60565

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

FSL - Growth

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

711.79

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	27	/	2013

Transaction ID : A2013-4572362

Amount of Each Receipt this Period

27.47

Full Name (Last, First, Middle Initial)

B. BRIAN G O'SULLIVAN

Mailing Address 1609 ONEIDA COURT

City	State	Zip Code
MT PROSPECT	IL	60056

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

AFT-Manager-Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

277.71

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	13	/	2013

Transaction ID : A2013-4523782

Amount of Each Receipt this Period

11.20

Full Name (Last, First, Middle Initial)

C. BRIAN G O'SULLIVAN

Mailing Address 1609 ONEIDA COURT

City	State	Zip Code
MT PROSPECT	IL	60056

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

AFT-Manager-Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.91

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	27	/	2013

Transaction ID : A2013-4572506

Amount of Each Receipt this Period

11.20

SUBTOTAL of Receipts This Page (optional)..... ►

49.87

TOTAL This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. MICHAEL C OCONNOR**

Mailing Address 1231 Isabella Street

City

Evanston

State

IL

Zip Code

60201

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Marketing Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.14

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523719**

Amount of Each Receipt this Period

15.29

Full Name (Last, First, Middle Initial)

**B. MICHAEL C OCONNOR**

Mailing Address 1231 Isabella Street

City

Evanston

State

IL

Zip Code

60201

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Marketing Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.43

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2013

**Transaction ID : A2013-4572443**

Amount of Each Receipt this Period

15.29

Full Name (Last, First, Middle Initial)

**C. ROGER D ODLE II**

Mailing Address 5170 BARCROFT DRIVE

City

HOFFMAN ESTATES

State

IL

Zip Code

60010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Prod Ops Sr State Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1164.83

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523772**

Amount of Each Receipt this Period

46.84

**SUBTOTAL** of Receipts This Page (optional)..... ►

77.42

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. ROGER D ODLE II**

Mailing Address 5170 BARCROFT DRIVE

City	State	Zip Code
HOFFMAN ESTATES	IL	60010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Prod Ops Sr State Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1211.67

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	27	/	2013

**Transaction ID : A2013-4572496**

Amount of Each Receipt this Period

46.84

Full Name (Last, First, Middle Initial)

**B. KENNETH I OMURA**

Mailing Address 361 KELBURN RD. #315

City	State	Zip Code
DEERFIELD	IL	60015

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1024.95

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	13	/	2013

**Transaction ID : A2013-4523692**

Amount of Each Receipt this Period

41.07

Full Name (Last, First, Middle Initial)

**C. KENNETH I OMURA**

Mailing Address 361 KELBURN RD. #315

City	State	Zip Code
DEERFIELD	IL	60015

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1066.02

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	27	/	2013

**Transaction ID : A2013-4572416**

Amount of Each Receipt this Period

41.07

**SUBTOTAL** of Receipts This Page (optional)..... ►

128.98

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. PAMELA J OVERTON**

Mailing Address 23475 W. Newhaven Dr.

City State Zip Code  
Hawthorn Woods IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
Allstate Insurance Company VP-CLM-Claims Product Lin

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1227.10

Date of Receipt

M M / D D / Y Y Y Y Y  
12 13 2013

**Transaction ID : A2013-4523686**

Amount of Each Receipt this Period

49.30

Full Name (Last, First, Middle Initial)

**B. PAMELA J OVERTON**

Mailing Address 23475 W. Newhaven Dr.

City State Zip Code  
Hawthorn Woods IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
Allstate Insurance Company VP-CLM-Claims Product Lin

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1276.40

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

**Transaction ID : A2013-4572410**

Amount of Each Receipt this Period

49.30

Full Name (Last, First, Middle Initial)

**C. DEAN T PAPPAS**

Mailing Address 3406 VICEROY COURT

City State Zip Code  
EDGEWATER MD 21037

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
Allstate Insurance Company VP-LGL-Legislative & Regu

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1244.46

Date of Receipt

M M / D D / Y Y Y Y Y  
12 13 2013

**Transaction ID : A2013-4523663**

Amount of Each Receipt this Period

50.25

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

148.85

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. DEAN T PAPPAS**

Mailing Address 3406 VICEROY COURT

City State Zip Code  
EDGEWATER MD 21037

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-LGL-Legislative & Regu

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1294.71

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

**Transaction ID : A2013-4572387**

Amount of Each Receipt this Period

50.25

Full Name (Last, First, Middle Initial)

## **B. LAURIE PELLOUCHOUD**

Mailing Address 1447 PLEASANT

City State Zip Code  
GLENVIEW IL 60025

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-PRD-Homeowners

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1104.08

Date of Receipt

M M / D D / Y Y Y Y Y  
12 13 2013

**Transaction ID : A2013-4523792**

Amount of Each Receipt this Period

44.50

Full Name (Last, First, Middle Initial)

## **C. LAURIE PELLOUCHOUD**

Mailing Address 1447 PLEASANT

City State Zip Code  
GLENVIEW IL 60025

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-PRD-Homeowners

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1148.58

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

**Transaction ID : A2013-4572516**

Amount of Each Receipt this Period

44.50

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

139.25

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. NANCY A PERRY**

Mailing Address 3575 CALDERWOOD DR

City State Zip Code  
 ROCKFORD IL 61114

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

HR-Client Partnership-Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

534.76

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

**Transaction ID : A2013-4523770**

Amount of Each Receipt this Period

21.43

Full Name (Last, First, Middle Initial)

**B. NANCY A PERRY**

Mailing Address 3575 CALDERWOOD DR

City State Zip Code  
 ROCKFORD IL 61114

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

HR-Client Partnership-Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

556.19

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

**Transaction ID : A2013-4572494**

Amount of Each Receipt this Period

21.43

Full Name (Last, First, Middle Initial)

**c. Opal G Perry**

Mailing Address 1406 Rosalie St.

City State Zip Code  
 Evanston IL 60201

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-ATO-Testing & Release

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

592.80

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

**Transaction ID : A2013-4523911**

Amount of Each Receipt this Period

45.60

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

88.46

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. Opal G Perry**

Mailing Address 1406 Rosalie St.

City State Zip Code  
 Evanston IL 60201

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
 Allstate Insurance Company VP-ATO-Testing & Release

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

638.40

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

**Transaction ID : A2013-4572634**

Amount of Each Receipt this Period

45.60

Full Name (Last, First, Middle Initial)

## **B. THOMAS S PETERSON**

Mailing Address 2756 BRECKENRIDGE LANE

City State Zip Code  
 NAPERVILLE IL 60565

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
 Allstate Insurance Company ATO-Manager-Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

862.71

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

**Transaction ID : A2013-4523884**

Amount of Each Receipt this Period

34.60

Full Name (Last, First, Middle Initial)

## **C. THOMAS S PETERSON**

Mailing Address 2756 BRECKENRIDGE LANE

City State Zip Code  
 NAPERVILLE IL 60565

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
 Allstate Insurance Company ATO-Manager-Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

897.31

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

**Transaction ID : A2013-4572608**

Amount of Each Receipt this Period

34.60

**SUBTOTAL** of Receipts This Page (optional)..... ►

114.80

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. JOHN C PINTOZZI**

Mailing Address 2114 W Cortland ST

City State Zip Code  
 CHICAGO IL 60647

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-INV-Chief Financial O

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1232.14

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

**Transaction ID : A2013-4523707**

Amount of Each Receipt this Period

40.62

Full Name (Last, First, Middle Initial)

**B. JOHN C PINTOZZI**

Mailing Address 2114 W Cortland ST

City State Zip Code  
 CHICAGO IL 60647

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-INV-Chief Financial O

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1272.76

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

**Transaction ID : A2013-4572431**

Amount of Each Receipt this Period

40.62

Full Name (Last, First, Middle Initial)

**C. RICHARD E PORTER**

Mailing Address 20827 36TH PL W

City State Zip Code  
 LYNNWOOD WA 98036

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Staff Claims Service Adju

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.62

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

**Transaction ID : A2013-4523866**

Amount of Each Receipt this Period

10.67

**SUBTOTAL** of Receipts This Page (optional)..... ►

91.91

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. RICHARD E PORTER**

Mailing Address 20827 36TH PL W

City State Zip Code  
LYNNWOOD WA 98036

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Staff Claims Service Adju

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

277.29

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

**Transaction ID : A2013-4572590**

Amount of Each Receipt this Period

10.67

Full Name (Last, First, Middle Initial)

**B. DAVID J PRENDERGAST**

Mailing Address 8262 Arrowleaf Turn

City State Zip Code  
Gainesville VA 20155

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Regional Presiden

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1611.02

Date of Receipt

M M / D D / Y Y Y Y Y  
12 13 2013

**Transaction ID : A2013-4523629**

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**C. DAVID J PRENDERGAST**

Mailing Address 8262 Arrowleaf Turn

City State Zip Code  
Gainesville VA 20155

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Regional Presiden

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1699.87

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

**Transaction ID : A2013-4572353**

Amount of Each Receipt this Period

88.85

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

174.52



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. THOMAS G PURTELL**

Mailing Address 22663 CHESHIRE COURT

City

DEER PARK

State

IL

Zip Code

60010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Sales Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

660.87

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523794**

Amount of Each Receipt this Period

26.64

Full Name (Last, First, Middle Initial)

**B. THOMAS G PURTELL**

Mailing Address 22663 CHESHIRE COURT

City

DEER PARK

State

IL

Zip Code

60010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Sales Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

687.51

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2013

**Transaction ID : A2013-4572518**

Amount of Each Receipt this Period

26.64

Full Name (Last, First, Middle Initial)

**C. MARY J QUINN**

Mailing Address 837 S. CHESTNUT AVENUE

City

ARLINGTON HEIGH

State

IL

Zip Code

60005

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1121.89

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523818**

Amount of Each Receipt this Period

45.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

98.28

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 138 OF 213  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. MARY J QUINN**

Mailing Address 837 S. CHESTNUT AVENUE

City State Zip Code  
ARLINGTON HEIGH IL 60005

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1166.89

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

**Transaction ID : A2013-4572542**

Amount of Each Receipt this Period

45.00

Full Name (Last, First, Middle Initial)

**B. CHARLES E RICE**

Mailing Address 1701 Crescent Drive

City State Zip Code  
Tarrytown NY 10591

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Frontline Performance Lea

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.74

Date of Receipt

M M / D D / Y Y Y Y Y  
12 13 2013

**Transaction ID : A2013-4523637**

Amount of Each Receipt this Period

8.50

Full Name (Last, First, Middle Initial)

**C. CHARLES E RICE**

Mailing Address 1701 Crescent Drive

City State Zip Code  
Tarrytown NY 10591

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Frontline Performance Lea

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.24

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

**Transaction ID : A2013-4572361**

Amount of Each Receipt this Period

8.50

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

62.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. KEVIN P RICE**

Mailing Address 618 Burdick St.

City State Zip Code  
 LIBERTYVILLE IL 60048

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Allstate Insurance Company

Occupation  
 ATO-Manager-Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1027.85

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

**Transaction ID : A2013-4523738**

Amount of Each Receipt this Period

41.33

Full Name (Last, First, Middle Initial)

## **B. KEVIN P RICE**

Mailing Address 618 Burdick St.

City State Zip Code  
 LIBERTYVILLE IL 60048

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Allstate Insurance Company

Occupation  
 ATO-Manager-Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1069.18

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

**Transaction ID : A2013-4572462**

Amount of Each Receipt this Period

41.33

Full Name (Last, First, Middle Initial)

## **C. MARIO RIZZO**

Mailing Address 5926 W. 90TH PLACE

City State Zip Code  
 OAK LAWN IL 60453

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Allstate Insurance Company

Occupation  
 SVP-FSS-Treasurer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1463.82

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

**Transaction ID : A2013-4523740**

Amount of Each Receipt this Period

59.01

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

141.67

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. MARIO RIZZO**

Mailing Address 5926 W. 90TH PLACE

City State Zip Code  
 OAK LAWN IL 60453

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-FSS-Treasurer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1522.83

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

**Transaction ID : A2013-4572464**

Amount of Each Receipt this Period

59.01

Full Name (Last, First, Middle Initial)

## **B. ROGER S ROBINSON**

Mailing Address 2529 Rolling Oaks Drive

City State Zip Code  
 Palm Harbor FL 34683

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corp Rel Regional Sr Man

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

636.62

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

**Transaction ID : A2013-4523681**

Amount of Each Receipt this Period

25.60

Full Name (Last, First, Middle Initial)

## **C. ROGER S ROBINSON**

Mailing Address 2529 Rolling Oaks Drive

City State Zip Code  
 Palm Harbor FL 34683

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corp Rel Regional Sr Man

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

662.22

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

**Transaction ID : A2013-4572405**

Amount of Each Receipt this Period

25.60

**SUBTOTAL** of Receipts This Page (optional)..... ►

110.21

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. GREGORY C ROHLFING**

Mailing Address 106 ASHLAND

City  
RIVER FOREST

State Zip Code  
IL 60305

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1118.53

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523705**

Amount of Each Receipt this Period

44.86

Full Name (Last, First, Middle Initial)

**B. GREGORY C ROHLFING**

Mailing Address 106 ASHLAND

City  
RIVER FOREST

State Zip Code  
IL 60305

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1163.39

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2013

**Transaction ID : A2013-4572429**

Amount of Each Receipt this Period

44.86

Full Name (Last, First, Middle Initial)

**C. ANDREW R ROMERO**

Mailing Address 105 BENETO CT

City  
FOLSOM

State Zip Code  
CA 95630

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Regional Sales Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

463.07

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523861**

Amount of Each Receipt this Period

18.62

**SUBTOTAL** of Receipts This Page (optional)..... ►

108.34

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. ANDREW R ROMERO**

Mailing Address 105 BENETO CT

City State Zip Code  
 FOLSOM CA 95630

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Allstate Insurance Company

Occupation  
 Regional Sales Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

496.58

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

**Transaction ID : A2013-4572585**

Amount of Each Receipt this Period

33.51

Full Name (Last, First, Middle Initial)

**B. James B Rosseau**

Mailing Address 10 N. Sycamore Avenue

City State Zip Code  
 Aldan PA 19018

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Allstate Insurance Company

Occupation  
 VP-EB-Affinity

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1549.20

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

**Transaction ID : A2013-4523903**

Amount of Each Receipt this Period

62.40

Full Name (Last, First, Middle Initial)

**C. JOHN ROSZKOWSKI**

Mailing Address 3371 VENARD RD.

City State Zip Code  
 DOWNERS GROVE IL 60515

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Allstate Insurance Company

Occupation  
 ATO-Manager-Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1051.46

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

**Transaction ID : A2013-4523771**

Amount of Each Receipt this Period

42.28

**SUBTOTAL** of Receipts This Page (optional)..... ►

138.19

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. JOHN ROSZKOWSKI**

Mailing Address 3371 VENARD RD.

City State Zip Code  
DOWNERS GROVE IL 60515

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
ATO-Manager-Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1093.74

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

**Transaction ID : A2013-4572495**

Amount of Each Receipt this Period

42.28

Full Name (Last, First, Middle Initial)

**B. DONALD L RUDD**

Mailing Address 25 CRESTVIEW TERRACE

City State Zip Code  
BUFFALO GROVE IL 60089

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
ATO-Manager-Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

367.69

Date of Receipt

M M / D D / Y Y Y Y Y  
12 13 2013

**Transaction ID : A2013-4523851**

Amount of Each Receipt this Period

14.76

Full Name (Last, First, Middle Initial)

**C. DONALD L RUDD**

Mailing Address 25 CRESTVIEW TERRACE

City State Zip Code  
BUFFALO GROVE IL 60089

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
ATO-Manager-Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

382.45

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

**Transaction ID : A2013-4572575**

Amount of Each Receipt this Period

14.76

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

71.80

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. CASSANDRA C RUSSELL**

Mailing Address 37194 N Dillon Ct

City

Lake Villa

State

IL

Zip Code

60046

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims Senior Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

394.88

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523833**

Amount of Each Receipt this Period

16.55

Full Name (Last, First, Middle Initial)

**B. CASSANDRA C RUSSELL**

Mailing Address 37194 N Dillon Ct

City

Lake Villa

State

IL

Zip Code

60046

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims Senior Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

411.43

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2013

**Transaction ID : A2013-4572557**

Amount of Each Receipt this Period

16.55

Full Name (Last, First, Middle Initial)

**C. PAUL R RYSKE**

Mailing Address 898 LONGWOOD DR.

City

LAKE FOREST

State

IL

Zip Code

60045

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1113.54

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523703**

Amount of Each Receipt this Period

44.70

**SUBTOTAL** of Receipts This Page (optional)..... ►

77.80

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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(check only one)

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. PAUL R RYSKE**

Mailing Address 898 LONGWOOD DR.

City State Zip Code  
LAKE FOREST IL 60045

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1158.24

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

**Transaction ID : A2013-4572427**

Amount of Each Receipt this Period

44.70

Full Name (Last, First, Middle Initial)

## **B. Donald D Sands**

Mailing Address 321 North Brainard Avenue

City State Zip Code  
Lagrange Park IL 60526

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-SOG-Protection Project

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1370.02

Date of Receipt

M M / D D / Y Y Y Y Y  
12 13 2013

**Transaction ID : A2013-4523896**

Amount of Each Receipt this Period

55.38

Full Name (Last, First, Middle Initial)

## **C. Donald D Sands**

Mailing Address 321 North Brainard Avenue

City State Zip Code  
Lagrange Park IL 60526

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-SOG-Protection Project

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1425.40

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

**Transaction ID : A2013-4572620**

Amount of Each Receipt this Period

55.38

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

155.46

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. PATRICK J SARB**

Mailing Address 4517 WAUBANSIE LANE

City State Zip Code  
 LISLE IL 60532

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Real Estate and Facilitie

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

379.72

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

**Transaction ID : A2013-4523812**

Amount of Each Receipt this Period

15.27

Full Name (Last, First, Middle Initial)

**B. PATRICK J SARB**

Mailing Address 4517 WAUBANSIE LANE

City State Zip Code  
 LISLE IL 60532

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Real Estate and Facilitie

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

394.99

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

**Transaction ID : A2013-4572536**

Amount of Each Receipt this Period

15.27

Full Name (Last, First, Middle Initial)

**C. KAREN M SCHECHT**

Mailing Address 754 Pinellas Bayway S

City State Zip Code  
 Tierra Verde FL 33715

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claim-Sr Claim Field Dire

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

401.03

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

**Transaction ID : A2013-4523741**

Amount of Each Receipt this Period

16.16

**SUBTOTAL** of Receipts This Page (optional)..... ►

46.70

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. KAREN M SCHECHT

Mailing Address 754 Pinellas Bayway S

City State Zip Code  
 Tierra Verde FL 33715

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claim-Sr Claim Field Dire

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

417.19

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

Transaction ID : A2013-4572465

Amount of Each Receipt this Period

16.16

Full Name (Last, First, Middle Initial)

B. PATRICK J SCHNEIDER

Mailing Address 210 NORTH TRAIL

City State Zip Code  
 HAWTHORN WOODS IL 60047

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

908.73

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

Transaction ID : A2013-4523775

Amount of Each Receipt this Period

36.54

Full Name (Last, First, Middle Initial)

C. PATRICK J SCHNEIDER

Mailing Address 210 NORTH TRAIL

City State Zip Code  
 HAWTHORN WOODS IL 60047

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

989.12

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

Transaction ID : A2013-4572499

Amount of Each Receipt this Period

80.39

SUBTOTAL of Receipts This Page (optional)..... ►

133.09

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. STEPHEN E SCHOLL**

Mailing Address 7 COPPERFIELD DRIVE

City State Zip Code  
HAWTHORN WOODS IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-HR-HR Business Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1467.57

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523651**

Amount of Each Receipt this Period

58.91

Full Name (Last, First, Middle Initial)

**B. STEPHEN E SCHOLL**

Mailing Address 7 COPPERFIELD DRIVE

City State Zip Code  
HAWTHORN WOODS IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-HR-HR Business Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1526.48

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2013

**Transaction ID : A2013-4572375**

Amount of Each Receipt this Period

58.91

Full Name (Last, First, Middle Initial)

**C. DALE J SCHUELLER**

Mailing Address 25 Scarlet Oak Rd

City State Zip Code  
Flemington NJ 08822

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Regional Sales Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.81

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523849**

Amount of Each Receipt this Period

21.11

**SUBTOTAL** of Receipts This Page (optional)..... ►

138.93

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. DALE J SCHUELLER**

Mailing Address 25 Scarlet Oak Rd

City

Flemington

State

NJ

Zip Code

08822

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Regional Sales Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

546.92

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2013

**Transaction ID : A2013-4572573**

Amount of Each Receipt this Period

21.11

Full Name (Last, First, Middle Initial)

**B. Shayna M Schulz**

Mailing Address 1523 Sheridan Road

City

Highland Park

State

IL

Zip Code

60035

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-MRK-Customer Contact C

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.15

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523897**

Amount of Each Receipt this Period

16.15

Full Name (Last, First, Middle Initial)

**C. Shayna M Schulz**

Mailing Address 1523 Sheridan Road

City

Highland Park

State

IL

Zip Code

60035

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-MRK-Customer Contact C

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.30

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2013

**Transaction ID : A2013-4572621**

Amount of Each Receipt this Period

16.15

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

53.41

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. PAUL SCHUTT**

Mailing Address 6323 N. NORMANDY

City State Zip Code  
 CHICAGO IL 60631

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-INV-Finance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1355.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

**Transaction ID : A2013-4523739**

Amount of Each Receipt this Period

54.20

Full Name (Last, First, Middle Initial)

**B. PAUL SCHUTT**

Mailing Address 6323 N. NORMANDY

City State Zip Code  
 CHICAGO IL 60631

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-INV-Finance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1409.20

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

**Transaction ID : A2013-4572463**

Amount of Each Receipt this Period

54.20

Full Name (Last, First, Middle Initial)

**C. DAVID J SCHWARTZER**

Mailing Address 128 Waverly Circle

City State Zip Code  
 Phoenixville PA 19460

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1327.61

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

**Transaction ID : A2013-4523826**

Amount of Each Receipt this Period

53.20

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

161.60

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. DAVID J SCHWARTZER**

Mailing Address 128 Waverly Circle

City State Zip Code  
 Phoenixville PA 19460

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1380.81

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

**Transaction ID : A2013-4572550**

Amount of Each Receipt this Period

53.20

Full Name (Last, First, Middle Initial)

**B. ALBERT SCHWARZHAUPT**

Mailing Address 29 Doral Drive

City State Zip Code  
 Hawthorn Woods IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Sr. Sales Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

444.42

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

**Transaction ID : A2013-4523636**

Amount of Each Receipt this Period

17.84

Full Name (Last, First, Middle Initial)

**C. ALBERT SCHWARZHAUPT**

Mailing Address 29 Doral Drive

City State Zip Code  
 Hawthorn Woods IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Sr. Sales Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

462.26

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

**Transaction ID : A2013-4572360**

Amount of Each Receipt this Period

17.84

**SUBTOTAL** of Receipts This Page (optional)..... ►

88.88

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

**A. LARRY M SEDILLO**

Mailing Address 1050 Lake Carolyn Pkwy

City	State	Zip Code
Irving	TX	75039

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.48

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	27	/	2013

Transaction ID : A2013-4572563

Amount of Each Receipt this Period

7.89

Full Name (Last, First, Middle Initial)

**B. STACY Y SHARPE**

Mailing Address 616 E Street NW #649

City	State	Zip Code
Washington	DC	20004

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-SAL-Field Vice Preside

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1196.95

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	13	/	2013

Transaction ID : A2013-4523766

Amount of Each Receipt this Period

48.13

Full Name (Last, First, Middle Initial)

**C. STACY Y SHARPE**

Mailing Address 616 E Street NW #649

City	State	Zip Code
Washington	DC	20004

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-SAL-Field Vice Preside

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1245.08

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	27	/	2013

Transaction ID : A2013-4572490

Amount of Each Receipt this Period

48.13

SUBTOTAL of Receipts This Page (optional)..... ►

104.15

TOTAL This Period (last page this line number only)..... ►



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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

**A. STEVEN E SHEBIK**

Mailing Address 517 ROBINWOOD LANE

City	State	Zip Code
WHEATON	IL	60189

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SMT-FSS-Chief Financial O

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3461.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	13	/	2013

Transaction ID : A2013-4523745

Amount of Each Receipt this Period

138.46

Full Name (Last, First, Middle Initial)

**B. STEVEN E SHEBIK**

Mailing Address 517 ROBINWOOD LANE

City	State	Zip Code
WHEATON	IL	60189

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SMT-FSS-Chief Financial O

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3599.96

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	27	/	2013

Transaction ID : A2013-4572469

Amount of Each Receipt this Period

138.46

Full Name (Last, First, Middle Initial)

**C. STEVEN R SHEFFEY**

Mailing Address 839 SUMAC

City	State	Zip Code
HIGHLAND PARK	IL	60035

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

536.11

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	13	/	2013

Transaction ID : A2013-4523700

Amount of Each Receipt this Period

21.52

SUBTOTAL of Receipts This Page (optional)..... ►

298.44

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. STEVEN R SHEFFEY**

Mailing Address 839 SUMAC

City

HIGHLAND PARK

State

IL

Zip Code

60035

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

557.63

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2013

**Transaction ID : A2013-4572424**

Amount of Each Receipt this Period

21.52

Full Name (Last, First, Middle Initial)

**B. ADAM R SHORES**

Mailing Address 157 Station Park Circle

City

Grayslake

State

IL

Zip Code

60030

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corp Rel Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

682.99

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523879**

Amount of Each Receipt this Period

27.92

Full Name (Last, First, Middle Initial)

**C. ADAM R SHORES**

Mailing Address 157 Station Park Circle

City

Grayslake

State

IL

Zip Code

60030

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corp Rel Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

710.91

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2013

**Transaction ID : A2013-4572603**

Amount of Each Receipt this Period

27.92

**SUBTOTAL** of Receipts This Page (optional)..... ►

77.36

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. DENIS C SHUNTA**

Mailing Address 5200 RIDGEGATE WAY

City State Zip Code  
FAIR OAKS CA 95628

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Field Product Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

590.68

Date of Receipt

M M / D D / Y Y Y Y Y  
12 13 2013

**Transaction ID : A2013-4523809**

Amount of Each Receipt this Period

23.71

Full Name (Last, First, Middle Initial)

**B. DENIS C SHUNTA**

Mailing Address 5200 RIDGEGATE WAY

City State Zip Code  
FAIR OAKS CA 95628

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Field Product Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

614.39

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

**Transaction ID : A2013-4572533**

Amount of Each Receipt this Period

23.71

Full Name (Last, First, Middle Initial)

**C. JAVIER SILVA**

Mailing Address 3549 N. OZANAM

City State Zip Code  
CHICAGO IL 60634

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Senior Operations Divisio

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.77

Date of Receipt

M M / D D / Y Y Y Y Y  
12 13 2013

**Transaction ID : A2013-4523714**

Amount of Each Receipt this Period

12.93

**SUBTOTAL** of Receipts This Page (optional)..... ►

60.35

**TOTAL** This Period (last page this line number only)..... ►

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. JAVIER SILVA**

Mailing Address 3549 N. OZANAM

City  
CHICAGO

State Zip Code  
IL 60634

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Operations Divisio

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.70

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

**Transaction ID : A2013-4572438**

Amount of Each Receipt this Period

12.93

Full Name (Last, First, Middle Initial)

**B. ROBERT L SIMMONS**

Mailing Address 1146 39th Ave NE

City  
St Petersburg

State Zip Code  
FL 33703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

886.57

Date of Receipt

M M / D D / Y Y Y Y Y  
12 13 2013

**Transaction ID : A2013-4523644**

Amount of Each Receipt this Period

35.65

Full Name (Last, First, Middle Initial)

**C. ROBERT L SIMMONS**

Mailing Address 1146 39th Ave NE

City  
St Petersburg

State Zip Code  
FL 33703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

922.22

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

**Transaction ID : A2013-4572368**

Amount of Each Receipt this Period

35.65

**SUBTOTAL** of Receipts This Page (optional)..... ►

84.23

**TOTAL** This Period (last page this line number only)..... ►

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. KIMBALL S SIMON**

Mailing Address 11 WEHRHEIM

City

BARRINGTON

State

IL

Zip Code

60010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1043.21

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523858**

Amount of Each Receipt this Period

41.84

Full Name (Last, First, Middle Initial)

**B. KIMBALL S SIMON**

Mailing Address 11 WEHRHEIM

City

BARRINGTON

State

IL

Zip Code

60010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1085.05

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2013

**Transaction ID : A2013-4572582**

Amount of Each Receipt this Period

41.84

Full Name (Last, First, Middle Initial)

**C. JOHN G SINICKI**

Mailing Address 2117 CARROLL CREEK VIEW CT

City

FREDERICK

State

MD

Zip Code

21702

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims Compliance Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.42

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523685**

Amount of Each Receipt this Period

12.22

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

95.90

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. JOHN G SINICKI**

Mailing Address 2117 CARROLL CREEK VIEW CT

City State Zip Code  
 FREDERICK MD 21702

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims Compliance Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.64

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

**Transaction ID : A2013-4572409**

Amount of Each Receipt this Period

12.22

Full Name (Last, First, Middle Initial)

**B. KIMBERLY J SLOANE**

Mailing Address 650 Rochelle Terrace

City State Zip Code  
 LOMBARD IL 60148

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Risk Management Senior Di

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

935.14

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

**Transaction ID : A2013-4523760**

Amount of Each Receipt this Period

30.42

Full Name (Last, First, Middle Initial)

**C. KIMBERLY J SLOANE**

Mailing Address 650 Rochelle Terrace

City State Zip Code  
 LOMBARD IL 60148

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Risk Management Senior Di

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

965.56

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

**Transaction ID : A2013-4572484**

Amount of Each Receipt this Period

30.42

**SUBTOTAL** of Receipts This Page (optional)..... ►

73.06

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. ANN M SMITH**

Mailing Address 16801 Carmichael Place

City State Zip Code  
Purcellville VA 20132

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Sales Support Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

404.17

Date of Receipt

M M / D D / Y Y Y Y Y  
12 13 2013

**Transaction ID : A2013-4523616**

Amount of Each Receipt this Period

16.23

Full Name (Last, First, Middle Initial)

**B. ANN M SMITH**

Mailing Address 16801 Carmichael Place

City State Zip Code  
Purcellville VA 20132

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Sales Support Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.40

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

**Transaction ID : A2013-4572340**

Amount of Each Receipt this Period

16.23

Full Name (Last, First, Middle Initial)

**C. CHARLES M SMITH**

Mailing Address 414 E. Burr Oak Dr.

City State Zip Code  
Arlington Heights IL 60004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

922.02

Date of Receipt

M M / D D / Y Y Y Y Y  
12 13 2013

**Transaction ID : A2013-4523829**

Amount of Each Receipt this Period

36.98

**SUBTOTAL** of Receipts This Page (optional)..... ►

69.44

**TOTAL** This Period (last page this line number only)..... ►

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. CHARLES M SMITH**

Mailing Address 414 E. Burr Oak Dr.

City

Arlington Heights

State

IL

Zip Code

60004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

959.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2013

**Transaction ID : A2013-4572553**

Amount of Each Receipt this Period

36.98

Full Name (Last, First, Middle Initial)

**B. KATHERINE A SMITH**

Mailing Address 231 KAINER AVENUE

City

BARRINGTON

State

IL

Zip Code

60010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.38

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523746**

Amount of Each Receipt this Period

18.51

Full Name (Last, First, Middle Initial)

**C. KATHERINE A SMITH**

Mailing Address 231 KAINER AVENUE

City

BARRINGTON

State

IL

Zip Code

60010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

476.89

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2013

**Transaction ID : A2013-4572470**

Amount of Each Receipt this Period

18.51

**SUBTOTAL** of Receipts This Page (optional)..... ►

74.00

**TOTAL** This Period (last page this line number only)..... ►



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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. KENNETH D SMITH**

Mailing Address 619 N HUMPHREY AVE.

City State Zip Code  
OAK PARK IL 60302

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Real Estate and Facilitie

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

387.69

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523768**

Amount of Each Receipt this Period

11.18

Full Name (Last, First, Middle Initial)

**B. KENNETH D SMITH**

Mailing Address 619 N HUMPHREY AVE.

City State Zip Code  
OAK PARK IL 60302

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Real Estate and Facilitie

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

407.90

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2013

**Transaction ID : A2013-4572492**

Amount of Each Receipt this Period

20.21

Full Name (Last, First, Middle Initial)

**C. RICHARD J SMITH Jr.**

Mailing Address 597 TREETOP LANE

City State Zip Code  
GURNEE IL 60031

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-PRD-Product Vice Presi

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

572.19

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523835**

Amount of Each Receipt this Period

23.10

**SUBTOTAL** of Receipts This Page (optional)..... ►

54.49

**TOTAL** This Period (last page this line number only)..... ►

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. RICHARD J SMITH Jr.**

Mailing Address 597 TREETOP LANE

City

GURNEE

State

IL

Zip Code

60031

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-PRD-Product Vice Presi

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

595.29

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2013

**Transaction ID : A2013-4572559**

Amount of Each Receipt this Period

23.10

Full Name (Last, First, Middle Initial)

**B. STEVEN P SORENSON**

Mailing Address 20712 High Ridge Dr

City

KILDEER

State

IL

Zip Code

60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-PRD-Product Operation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2269.71

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523820**

Amount of Each Receipt this Period

91.19

Full Name (Last, First, Middle Initial)

**C. STEVEN P SORENSON**

Mailing Address 20712 High Ridge Dr

City

KILDEER

State

IL

Zip Code

60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-PRD-Product Operation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2360.90

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2013

**Transaction ID : A2013-4572544**

Amount of Each Receipt this Period

91.19

**SUBTOTAL** of Receipts This Page (optional)..... ►

205.48

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. KEVIN A SPATARO**

Mailing Address 1663 SARATOGA LANE

City  
GLENVIEW

State Zip Code  
IL 60026

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-FSS-Accounting Resear

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

961.53

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523788**

Amount of Each Receipt this Period

38.67

Full Name (Last, First, Middle Initial)

## **B. KEVIN A SPATARO**

Mailing Address 1663 SARATOGA LANE

City  
GLENVIEW

State Zip Code  
IL 60026

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-FSS-Accounting Resear

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.20

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2013

**Transaction ID : A2013-4572512**

Amount of Each Receipt this Period

38.67

Full Name (Last, First, Middle Initial)

## **C. BRIAN M SPENCE**

Mailing Address 1001 N Vermont St

City  
Arlington

State Zip Code  
VA 22201

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Controller

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

717.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523806**

Amount of Each Receipt this Period

28.88

**SUBTOTAL** of Receipts This Page (optional)..... ►

106.22

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. BRIAN M SPENCE**

Mailing Address 1001 N Vermont St

City State Zip Code  
Arlington VA 22201

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Controller

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

745.88

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

**Transaction ID : A2013-4572530**

Amount of Each Receipt this Period

28.88

Full Name (Last, First, Middle Initial)

## **B. MARY SPRINGBERG**

Mailing Address 4745 KINGS WAY - NORTH

City State Zip Code  
GURNEE IL 60031

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-AF-Technology

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1501.52

Date of Receipt

M M / D D / Y Y Y Y Y  
12 13 2013

**Transaction ID : A2013-4523695**

Amount of Each Receipt this Period

60.48

Full Name (Last, First, Middle Initial)

## **C. MARY SPRINGBERG**

Mailing Address 4745 KINGS WAY - NORTH

City State Zip Code  
GURNEE IL 60031

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-AF-Technology

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1562.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

**Transaction ID : A2013-4572419**

Amount of Each Receipt this Period

60.48

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

149.84

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(check only one)

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. GARY S STERE**

Mailing Address 2015 SELVA MADERA COURT

City State Zip Code  
ATLANTIC BEACH FL 32233

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1090.38

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523683**

Amount of Each Receipt this Period

43.77

Full Name (Last, First, Middle Initial)

## **B. GARY S STERE**

Mailing Address 2015 SELVA MADERA COURT

City State Zip Code  
ATLANTIC BEACH FL 32233

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1134.15

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2013

**Transaction ID : A2013-4572407**

Amount of Each Receipt this Period

43.77

Full Name (Last, First, Middle Initial)

## **C. MYRON E STOUFFER**

Mailing Address P.O. Box 533

City State Zip Code  
LIBERTYVILLE IL 60048

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-AHA-Independent Chann

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

761.67

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523679**

Amount of Each Receipt this Period

30.78

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

118.32

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. MYRON E STOUFFER**

Mailing Address P.O. Box 533

City  
LIBERTYVILLE

State Zip Code  
IL 60048

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-AHA-Independent Chann

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

792.45

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

**Transaction ID : A2013-4572403**

Amount of Each Receipt this Period

30.78

Full Name (Last, First, Middle Initial)

## **B. DANIEL J SULLIVAN**

Mailing Address 4018 BERRYWOOD DRIVE

City  
SEAFORD

State Zip Code  
NY 11783

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

FSL - Growth

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

344.95

Date of Receipt

M M / D D / Y Y Y Y Y  
12 13 2013

**Transaction ID : A2013-4523639**

Amount of Each Receipt this Period

13.87

Full Name (Last, First, Middle Initial)

## **C. DANIEL J SULLIVAN**

Mailing Address 4018 BERRYWOOD DRIVE

City  
SEAFORD

State Zip Code  
NY 11783

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

FSL - Growth

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

358.82

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

**Transaction ID : A2013-4572363**

Amount of Each Receipt this Period

13.87

**SUBTOTAL** of Receipts This Page (optional)..... ►

58.52

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

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 (check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

**A. KATHLEEN A SWAIN**

Mailing Address 242 HIGHVIEW

City	State	Zip Code
ELMHURST	IL	60126

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-FSS-Internal Auditing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1565.39

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	13	/	2013

Transaction ID : A2013-4523709

Amount of Each Receipt this Period

62.92

Full Name (Last, First, Middle Initial)

**B. KATHLEEN A SWAIN**

Mailing Address 242 HIGHVIEW

City	State	Zip Code
ELMHURST	IL	60126

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-FSS-Internal Auditing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1628.31

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	27	/	2013

Transaction ID : A2013-4572433

Amount of Each Receipt this Period

62.92

Full Name (Last, First, Middle Initial)

**C. CARL J TACKETT**

Mailing Address 307 WENDRON COURT

City	State	Zip Code
FRANKLIN	TN	37069

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Sales Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.42

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	13	/	2013

Transaction ID : A2013-4523716

Amount of Each Receipt this Period

20.21

SUBTOTAL of Receipts This Page (optional)..... ▶

146.05

TOTAL This Period (last page this line number only)..... ▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. CARL J TACKETT**

Mailing Address 307 WENDRON COURT

City  
FRANKLIN

State Zip Code  
TN 37069

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Sales Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

490.63

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

**Transaction ID : A2013-4572440**

Amount of Each Receipt this Period

20.21

Full Name (Last, First, Middle Initial)

**B. PHILLIP J TELGENHOFF**

Mailing Address 141 Lafite Ct.

City  
EL DORADO HILLS

State Zip Code  
CA 95762

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
VP-SAL-Field Vice Preside

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.26

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

**Transaction ID : A2013-4572591**

Amount of Each Receipt this Period

9.92

Full Name (Last, First, Middle Initial)

**C. SEAN D THAKUR**

Mailing Address 701 N. Chruch St #1

City  
Charlotte

State Zip Code  
NC 28202

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
ATO-Leader-Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.43

Date of Receipt

M M / D D / Y Y Y Y Y  
12 13 2013

**Transaction ID : A2013-4523838**

Amount of Each Receipt this Period

19.32

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

49.45



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. SEAN D THAKUR**

Mailing Address 701 N. Chruch St #1

City

Charlotte

State

NC

Zip Code

28202

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Leader-Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.75

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2013

**Transaction ID : A2013-4572562**

Amount of Each Receipt this Period

19.32

Full Name (Last, First, Middle Initial)

**B. Joy A Thomas**

Mailing Address 2240 Henley Street

City

Glenview

State

IL

Zip Code

60025

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Finance Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

351.64

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523891**

Amount of Each Receipt this Period

14.15

Full Name (Last, First, Middle Initial)

**C. Joy A Thomas**

Mailing Address 2240 Henley Street

City

Glenview

State

IL

Zip Code

60025

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Finance Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.79

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2013

**Transaction ID : A2013-4572615**

Amount of Each Receipt this Period

14.15

**SUBTOTAL** of Receipts This Page (optional)..... ►

47.62

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. MICHAEL A THOMAS**

Mailing Address 152 Robsart Place

City

KENILWORTH

State

IL

Zip Code

60043

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-RE-Administration & Re

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

605.38

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523883**

Amount of Each Receipt this Period

24.35

Full Name (Last, First, Middle Initial)

**B. MICHAEL A THOMAS**

Mailing Address 152 Robsart Place

City

KENILWORTH

State

IL

Zip Code

60043

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-RE-Administration & Re

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

629.73

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2013

**Transaction ID : A2013-4572607**

Amount of Each Receipt this Period

24.35

Full Name (Last, First, Middle Initial)

**C. GERALYN A THOMPSON**

Mailing Address 6906 S. BENNETT

City

CHICAGO

State

IL

Zip Code

60649

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corp Rel Sr Manager

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

826.95

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523733**

Amount of Each Receipt this Period

33.24

**SUBTOTAL** of Receipts This Page (optional)..... ►

81.94

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. GERALYN A THOMPSON**

Mailing Address 6906 S. BENNETT

City State Zip Code  
 CHICAGO IL 60649

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corp Rel Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

860.19

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

**Transaction ID : A2013-4572457**

Amount of Each Receipt this Period

33.24

Full Name (Last, First, Middle Initial)

**B. MARK L THOMPSON**

Mailing Address 3233 N RACINE #2

City State Zip Code  
 CHICAGO IL 60657

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-PRD-Encompass

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

929.69

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

**Transaction ID : A2013-4523850**

Amount of Each Receipt this Period

47.57

Full Name (Last, First, Middle Initial)

**C. MARK L THOMPSON**

Mailing Address 3233 N RACINE #2

City State Zip Code  
 CHICAGO IL 60657

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-PRD-Encompass

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

977.26

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

**Transaction ID : A2013-4572574**

Amount of Each Receipt this Period

47.57

**SUBTOTAL** of Receipts This Page (optional)..... ►

128.38

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. WILLIAM J THOMPSON**

Mailing Address 5129 Pine River Trail

City

Castle Rock

State

CO

Zip Code

80108

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1260.34

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523675**

Amount of Each Receipt this Period

50.68

Full Name (Last, First, Middle Initial)

**B. WILLIAM J THOMPSON**

Mailing Address 5129 Pine River Trail

City

Castle Rock

State

CO

Zip Code

80108

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1311.02

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2013

**Transaction ID : A2013-4572399**

Amount of Each Receipt this Period

50.68

Full Name (Last, First, Middle Initial)

**C. MELINDA S TUNNER**

Mailing Address 5430 TALL OAKS DRIVE

City

LONG GROVE

State

IL

Zip Code

60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-SAL-Sales Programs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1356.77

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523834**

Amount of Each Receipt this Period

54.51

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

155.87

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. MELINDA S TUNNER**

Mailing Address 5430 TALL OAKS DRIVE

City  
LONG GROVE

State Zip Code  
IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-SAL-Sales Programs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1411.28

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

**Transaction ID : A2013-4572558**

Amount of Each Receipt this Period

54.51

Full Name (Last, First, Middle Initial)

**B. RICHARD D TURANO**

Mailing Address 4960 S CHESTER ST

City  
ENGLEWOOD

State Zip Code  
CO 80111

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

539.21

Date of Receipt

M M / D D / Y Y Y Y Y  
12 13 2013

**Transaction ID : A2013-4523632**

Amount of Each Receipt this Period

21.70

Full Name (Last, First, Middle Initial)

**C. RICHARD D TURANO**

Mailing Address 4960 S CHESTER ST

City  
ENGLEWOOD

State Zip Code  
CO 80111

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.91

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

**Transaction ID : A2013-4572356**

Amount of Each Receipt this Period

21.70

**SUBTOTAL** of Receipts This Page (optional)..... ►

97.91

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
Detailed Summary Page

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. SHAUNDRA L TURNER**

Mailing Address 515 Main Street Unit 909

City

Evanston

State

IL

Zip Code

60202

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corp Rel Regional Sr Man

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

258.10

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523617**

Amount of Each Receipt this Period

25.81

Full Name (Last, First, Middle Initial)

**B. SHAUNDRA L TURNER**

Mailing Address 515 Main Street Unit 909

City

Evanston

State

IL

Zip Code

60202

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corp Rel Regional Sr Man

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

283.91

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2013

**Transaction ID : A2013-4572341**

Amount of Each Receipt this Period

25.81

Full Name (Last, First, Middle Initial)

**C. THOMAS P TUZAK**

Mailing Address 443 HUNTINGTON LANE

City

ELMHURST

State

IL

Zip Code

60126

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Frontline Process Expert

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

284.60

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523747**

Amount of Each Receipt this Period

11.44

**SUBTOTAL** of Receipts This Page (optional)..... ►

63.06

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. THOMAS P TUZAK**

Mailing Address 443 HUNTINGTON LANE

City State Zip Code  
ELMHURST IL 60126

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Frontline Process Expert

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

296.04

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

**Transaction ID : A2013-4572471**

Amount of Each Receipt this Period

11.44

Full Name (Last, First, Middle Initial)

**B. JEFFREY W URE**

Mailing Address 609 S. KENNICOTT AVE

City State Zip Code  
ARLINGTON HTS IL 60005

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.60

Date of Receipt

M M / D D / Y Y Y Y Y  
12 13 2013

**Transaction ID : A2013-4523751**

Amount of Each Receipt this Period

10.26

Full Name (Last, First, Middle Initial)

**C. JEFFREY W URE**

Mailing Address 609 S. KENNICOTT AVE

City State Zip Code  
ARLINGTON HTS IL 60005

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Sr Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.86

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

**Transaction ID : A2013-4572475**

Amount of Each Receipt this Period

10.26

**SUBTOTAL** of Receipts This Page (optional)..... ►

31.96

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. WILLIAM A VAINISI**

Mailing Address 636 BALMORAL LANE

City  
INVERNESSState Zip Code  
IL 60067FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-LGL-Government &amp; Indu

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1592.23

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	13	/	2013

**Transaction ID : A2013-4523742**

Amount of Each Receipt this Period

63.97

Full Name (Last, First, Middle Initial)

**B. WILLIAM A VAINISI**

Mailing Address 636 BALMORAL LANE

City  
INVERNESSState Zip Code  
IL 60067FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-LGL-Government &amp; Indu

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1656.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	27	/	2013

**Transaction ID : A2013-4572466**

Amount of Each Receipt this Period

63.97

Full Name (Last, First, Middle Initial)

**C. LISA A VAN SCOYOC**

Mailing Address 555 PRIMROSE LANE

City  
CRYSTAL LAKEState Zip Code  
IL 60014FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Sr. Manager Accounting/Fi

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

429.68

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	13	/	2013

**Transaction ID : A2013-4523750**

Amount of Each Receipt this Period

17.27

**SUBTOTAL** of Receipts This Page (optional)..... ►

145.21

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. LISA A VAN SCOYOC**

Mailing Address 555 PRIMROSE LANE

City State Zip Code  
 CRYSTAL LAKE IL 60014

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Sr. Manager Accounting/Fi

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

446.95

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

**Transaction ID : A2013-4572474**

Amount of Each Receipt this Period

17.27

Full Name (Last, First, Middle Initial)

## **B. PATRICIA C VANLAMMEREN**

Mailing Address 2800 Birchwood Avenue

City State Zip Code  
 Wilmette IL 60091

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-AHA-Field Business Co

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1750.23

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

**Transaction ID : A2013-4523857**

Amount of Each Receipt this Period

70.38

Full Name (Last, First, Middle Initial)

## **C. PATRICIA C VANLAMMEREN**

Mailing Address 2800 Birchwood Avenue

City State Zip Code  
 Wilmette IL 60091

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-AHA-Field Business Co

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1820.61

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

**Transaction ID : A2013-4572581**

Amount of Each Receipt this Period

70.38

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

158.03

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. RICHARD VAVRA**

Mailing Address 2514 S WESLEY AVENUE

City State Zip Code  
BERWYN IL 60402

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1093.38

Date of Receipt

M M / D D / Y Y Y Y Y  
12 13 2013

**Transaction ID : A2013-4523704**

Amount of Each Receipt this Period

43.89

Full Name (Last, First, Middle Initial)

**B. RICHARD VAVRA**

Mailing Address 2514 S WESLEY AVENUE

City State Zip Code  
BERWYN IL 60402

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1137.27

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

**Transaction ID : A2013-4572428**

Amount of Each Receipt this Period

43.89

Full Name (Last, First, Middle Initial)

**C. STEVEN C VERNEY**

Mailing Address 37144 FOX HILL DR

City State Zip Code  
WADSWORTH IL 60083

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-FSS-Chief Risk Office

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3494.29

Date of Receipt

M M / D D / Y Y Y Y Y  
12 13 2013

**Transaction ID : A2013-4523640**

Amount of Each Receipt this Period

140.38

**SUBTOTAL** of Receipts This Page (optional)..... ►

228.16

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. STEVEN C VERNEY**

Mailing Address 37144 FOX HILL DR

City  
WADSWORTH

State Zip Code  
IL 60083

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
EVP-FSS-Chief Risk Office

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3634.67

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

**Transaction ID : A2013-4572364**

Amount of Each Receipt this Period

140.38

Full Name (Last, First, Middle Initial)

**B. MICHAEL F VITALE JR Jr.**

Mailing Address 1824 Roy Lane

City  
Forks Twp.

State Zip Code  
PA 18040

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Regional Sales Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.28

Date of Receipt

M M / D D / Y Y Y Y Y  
12 13 2013

**Transaction ID : A2013-4523659**

Amount of Each Receipt this Period

17.05

Full Name (Last, First, Middle Initial)

**C. MICHAEL F VITALE JR Jr.**

Mailing Address 1824 Roy Lane

City  
Forks Twp.

State Zip Code  
PA 18040

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Regional Sales Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.33

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

**Transaction ID : A2013-4572383**

Amount of Each Receipt this Period

17.05

**SUBTOTAL** of Receipts This Page (optional)..... ►

174.48

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. James M Vogel**

Mailing Address 510 Mawman Ave

City

Lake Bluff

State

IL

Zip Code

60044

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-SAL-Field Vice Preside

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

414.76

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523895**

Amount of Each Receipt this Period

16.65

Full Name (Last, First, Middle Initial)

**B. James M Vogel**

Mailing Address 510 Mawman Ave

City

Lake Bluff

State

IL

Zip Code

60044

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-SAL-Field Vice Preside

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

431.41

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2013

**Transaction ID : A2013-4572619**

Amount of Each Receipt this Period

16.65

Full Name (Last, First, Middle Initial)

**C. EDWIN L WASINGER JR Jr.**

Mailing Address 6245 MURIFIELD DRIVE

City

GURNEE

State

IL

Zip Code

60031

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

AHA-Strategic Operations-

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

509.69

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523793**

Amount of Each Receipt this Period

20.53

**SUBTOTAL** of Receipts This Page (optional)..... ►

53.83

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. EDWIN L WASINGER JR Jr.**

Mailing Address 6245 MURIFIELD DRIVE

City  
GURNEE

State Zip Code  
IL 60031

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
AHA-Strategic Operations-

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.22

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

**Transaction ID : A2013-4572517**

Amount of Each Receipt this Period

20.53

Full Name (Last, First, Middle Initial)

**B. Robert Wasserman**

Mailing Address 1N165 Partridge Dr

City  
Wheaton

State Zip Code  
IL 60188

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
SVP-MRK-eBusiness & Direc

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1748.54

Date of Receipt

M M / D D / Y Y Y Y Y  
12 13 2013

**Transaction ID : A2013-4523893**

Amount of Each Receipt this Period

70.28

Full Name (Last, First, Middle Initial)

**C. Robert Wasserman**

Mailing Address 1N165 Partridge Dr

City  
Wheaton

State Zip Code  
IL 60188

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
SVP-MRK-eBusiness & Direc

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1818.82

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

**Transaction ID : A2013-4572617**

Amount of Each Receipt this Period

70.28

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

161.09

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. LEWIS C WEBB II**

Mailing Address 1444 El Pardo Dr

City State Zip Code  
 Trinity FL 34655

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Regional Financial Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

412.96

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

**Transaction ID : A2013-4523877**

Amount of Each Receipt this Period

17.54

Full Name (Last, First, Middle Initial)

## **B. LEWIS C WEBB II**

Mailing Address 1444 El Pardo Dr

City State Zip Code  
 Trinity FL 34655

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Regional Financial Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.50

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

**Transaction ID : A2013-4572601**

Amount of Each Receipt this Period

17.54

Full Name (Last, First, Middle Initial)

## **C. LESLEY R WEBER**

Mailing Address 230 Riverside Drive

City State Zip Code  
 New York NY 10025

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

541.83

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

**Transaction ID : A2013-4523814**

Amount of Each Receipt this Period

33.70

**SUBTOTAL** of Receipts This Page (optional)..... ►

68.78

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. LESLEY R WEBER**

Mailing Address 230 Riverside Drive

City State Zip Code  
 New York NY 10025

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Senior Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.53

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

**Transaction ID : A2013-4572538**

Amount of Each Receipt this Period

33.70

Full Name (Last, First, Middle Initial)

## **B. BRET D WEHRLY**

Mailing Address 2079 POWHATAN TRAIL

City State Zip Code  
 RICHMOND KY 40475

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

FSL - Growth

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

342.08

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

**Transaction ID : A2013-4523856**

Amount of Each Receipt this Period

13.73

Full Name (Last, First, Middle Initial)

## **C. BRET D WEHRLY**

Mailing Address 2079 POWHATAN TRAIL

City State Zip Code  
 RICHMOND KY 40475

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

FSL - Growth

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.81

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

**Transaction ID : A2013-4572580**

Amount of Each Receipt this Period

13.73

**SUBTOTAL** of Receipts This Page (optional)..... ►

61.16

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. JEROME WHITE**

Mailing Address 5081 OVERLOOK DR.

City State Zip Code  
ROSWELL GA 30075

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Sales Support Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.97

Date of Receipt

M M / D D / Y Y Y Y Y  
12 13 2013

**Transaction ID : A2013-4523647**

Amount of Each Receipt this Period

11.68

Full Name (Last, First, Middle Initial)

**B. JEROME WHITE**

Mailing Address 5081 OVERLOOK DR.

City State Zip Code  
ROSWELL GA 30075

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Sales Support Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.65

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

**Transaction ID : A2013-4572371**

Amount of Each Receipt this Period

11.68

Full Name (Last, First, Middle Initial)

**C. SAMUEL W WHITEMAN**

Mailing Address 47 Park View Ln

City State Zip Code  
Hawthorn Woods IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claim Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

907.51

Date of Receipt

M M / D D / Y Y Y Y Y  
12 13 2013

**Transaction ID : A2013-4523841**

Amount of Each Receipt this Period

36.43

**SUBTOTAL** of Receipts This Page (optional)..... ►

59.79

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. SAMUEL W WHITEMAN**

Mailing Address 47 Park View Ln

City State Zip Code  
Hawthorn Woods IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claim Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

943.94

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

**Transaction ID : A2013-4572565**

Amount of Each Receipt this Period

36.43

Full Name (Last, First, Middle Initial)

**B. CYNTHIA A WHITFIELD**

Mailing Address 298 Keswick Grove Lane

City State Zip Code  
Franklin TN 37067

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.14

Date of Receipt

M M / D D / Y Y Y Y Y  
12 13 2013

**Transaction ID : A2013-4523643**

Amount of Each Receipt this Period

24.81

Full Name (Last, First, Middle Initial)

**C. CYNTHIA A WHITFIELD**

Mailing Address 298 Keswick Grove Lane

City State Zip Code  
Franklin TN 37067

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

629.95

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

**Transaction ID : A2013-4572367**

Amount of Each Receipt this Period

24.81

**SUBTOTAL** of Receipts This Page (optional)..... ►

86.05

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

## **A. GENE T WHOLF**

Mailing Address 115 MOHAWK TRAIL

City State Zip Code  
LAKE ZURICH IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Frontline Performance Lea

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.50

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523863**

Amount of Each Receipt this Period

12.70

Full Name (Last, First, Middle Initial)

## **B. GENE T WHOLF**

Mailing Address 115 MOHAWK TRAIL

City State Zip Code  
LAKE ZURICH IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Frontline Performance Lea

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.20

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2013

**Transaction ID : A2013-4572587**

Amount of Each Receipt this Period

12.70

Full Name (Last, First, Middle Initial)

## **C. ROBERT N WHOLF**

Mailing Address 115 B Mohawk Trail

City State Zip Code  
LAKE ZURICH IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Emerging Business Operati

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

581.84

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523694**

Amount of Each Receipt this Period

23.36

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

48.76

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. ROBERT N WHOLF**

Mailing Address 115 B Mohawk Trail

City

LAKE ZURICH

State

IL

Zip Code

60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Emerging Business Operati

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.20

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2013

**Transaction ID : A2013-4572418**

Amount of Each Receipt this Period

23.36

Full Name (Last, First, Middle Initial)

**B. JOHN K WILCOX**

Mailing Address 1120 JESSICA LANE

City

LIBERTYVILLE

State

IL

Zip Code

60048

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Risk Mgmt-NCS Product Sr.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1074.55

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523718**

Amount of Each Receipt this Period

45.00

Full Name (Last, First, Middle Initial)

**C. JOHN K WILCOX**

Mailing Address 1120 JESSICA LANE

City

LIBERTYVILLE

State

IL

Zip Code

60048

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Risk Mgmt-NCS Product Sr.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1119.55

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2013

**Transaction ID : A2013-4572442**

Amount of Each Receipt this Period

45.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

113.36

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. JAMES L WILLCOX**

Mailing Address 1562 Sienna Oak Court

City State Zip Code  
Sandy UT 84092

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Market Claim Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

660.80

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523677**

Amount of Each Receipt this Period

27.82

Full Name (Last, First, Middle Initial)

**B. JAMES L WILLCOX**

Mailing Address 1562 Sienna Oak Court

City State Zip Code  
Sandy UT 84092

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Market Claim Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

688.62

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2013

**Transaction ID : A2013-4572401**

Amount of Each Receipt this Period

27.82

Full Name (Last, First, Middle Initial)

**C. JEFFREY W WILLIAMS**

Mailing Address 7104 CHARDON COURT

City State Zip Code  
CLARKSVILLE MD 21029

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Allstate Insurance Company

Occupation  
Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1115.40

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523734**

Amount of Each Receipt this Period

44.85

**SUBTOTAL** of Receipts This Page (optional)..... ►

100.49

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. JEFFREY W WILLIAMS**

Mailing Address 7104 CHARDON COURT

City State Zip Code  
 CLARKSVILLE MD 21029

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1160.25

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

**Transaction ID : A2013-4572458**

Amount of Each Receipt this Period

44.85

Full Name (Last, First, Middle Initial)

**B. KURT L WINTER**

Mailing Address 1403 N. WALNUT

City State Zip Code  
 ARLINGTON HGHTS IL 60004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-MRK-Regional Marketing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

533.74

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

**Transaction ID : A2013-4523878**

Amount of Each Receipt this Period

21.47

Full Name (Last, First, Middle Initial)

**C. KURT L WINTER**

Mailing Address 1403 N. WALNUT

City State Zip Code  
 ARLINGTON HGHTS IL 60004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-MRK-Regional Marketing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

555.21

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

**Transaction ID : A2013-4572602**

Amount of Each Receipt this Period

21.47

**SUBTOTAL** of Receipts This Page (optional)..... ►

87.79

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. Matthew E Winter**

Mailing Address 70 Ferncliff Drive

City State Zip Code  
West Hartford CT 06117

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-PC-Pres Auto Home &

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4474.10

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523898**

Amount of Each Receipt this Period

173.08

Full Name (Last, First, Middle Initial)

**B. Matthew E Winter**

Mailing Address 70 Ferncliff Drive

City State Zip Code  
West Hartford CT 06117

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-PC-Pres Auto Home &

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4647.18

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2013

**Transaction ID : A2013-4572622**

Amount of Each Receipt this Period

173.08

Full Name (Last, First, Middle Initial)

**C. RONALD W WINTER**

Mailing Address 2908 GREY HERON CT.

City State Zip Code  
JOHNSBURG IL 60051

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Leader-Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

517.50

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523787**

Amount of Each Receipt this Period

20.81

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

366.97

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. RONALD W WINTER**

Mailing Address 2908 GREY HERON CT.

City

JOHNSBURG

State

IL

Zip Code

60051

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Leader-Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

538.31

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2013

**Transaction ID : A2013-4572511**

Amount of Each Receipt this Period

20.81

Full Name (Last, First, Middle Initial)

**B. BRUCE A WOIKE**

Mailing Address 1318 N. CHESTNUT AVE.

City

ARLINGTON HTS.

State

IL

Zip Code

60004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Accounting Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.93

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523784**

Amount of Each Receipt this Period

22.50

Full Name (Last, First, Middle Initial)

**C. BRUCE A WOIKE**

Mailing Address 1318 N. CHESTNUT AVE.

City

ARLINGTON HTS.

State

IL

Zip Code

60004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Accounting Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

583.43

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2013

**Transaction ID : A2013-4572508**

Amount of Each Receipt this Period

22.50

**SUBTOTAL** of Receipts This Page (optional)..... ►

65.81

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. ANGELA K WOIROL**

Mailing Address 28616 Sky Crest Dr

City

Ivanhoe

State

IL

Zip Code

60060

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims Field Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1011.78

Date of Receipt

12 / 13 / 2013

**Transaction ID : A2013-4523842**

Amount of Each Receipt this Period

40.70

Full Name (Last, First, Middle Initial)

**B. ANGELA K WOIROL**

Mailing Address 28616 Sky Crest Dr

City

Ivanhoe

State

IL

Zip Code

60060

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims Field Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1052.48

Date of Receipt

12 / 27 / 2013

**Transaction ID : A2013-4572566**

Amount of Each Receipt this Period

40.70

Full Name (Last, First, Middle Initial)

**C. MATTHEW WOJTASZEK**

Mailing Address 7 WELLESLEY COURT

City

HAWTHORN WOODS

State

IL

Zip Code

60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Operations Department Man

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

435.83

Date of Receipt

12 / 13 / 2013

**Transaction ID : A2013-4523642**

Amount of Each Receipt this Period

17.48

**SUBTOTAL** of Receipts This Page (optional)..... ►

98.88

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. MATTHEW WOJTASZEK**

Mailing Address 7 WELLESLEY COURT

City State Zip Code  
HAWTHORN WOODS IL 60047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Operations Department Man

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

453.31

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

**Transaction ID : A2013-4572366**

Amount of Each Receipt this Period

17.48

Full Name (Last, First, Middle Initial)

**B. DAVID E WOOLWINE**

Mailing Address 1608 W. ROSEHILL DR

City State Zip Code  
CHICAGO IL 60660

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corp Rel Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.18

Date of Receipt

M M / D D / Y Y Y Y Y  
12 13 2013

**Transaction ID : A2013-4523669**

Amount of Each Receipt this Period

20.35

Full Name (Last, First, Middle Initial)

**C. DAVID E WOOLWINE**

Mailing Address 1608 W. ROSEHILL DR

City State Zip Code  
CHICAGO IL 60660

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corp Rel Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

545.53

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

**Transaction ID : A2013-4572393**

Amount of Each Receipt this Period

20.35

**SUBTOTAL** of Receipts This Page (optional)..... ►

58.18

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. DONALD F WYATT JR Jr.**

Mailing Address 811 DRESSER DR.

City

MT PROSPECT

State

IL

Zip Code

60056

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

952.50

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523721**

Amount of Each Receipt this Period

38.10

Full Name (Last, First, Middle Initial)

**B. DONALD F WYATT JR Jr.**

Mailing Address 811 DRESSER DR.

City

MT PROSPECT

State

IL

Zip Code

60056

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

990.60

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2013

**Transaction ID : A2013-4572445**

Amount of Each Receipt this Period

38.10

Full Name (Last, First, Middle Initial)

**C. FLOYD M YAGER**

Mailing Address 1610 BIRCH LANE

City

PARK RIDGE

State

IL

Zip Code

60068

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-AP-Chief Data Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1546.41

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523759**

Amount of Each Receipt this Period

62.31

**SUBTOTAL** of Receipts This Page (optional)..... ►

138.51

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 195 OF 213  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. FLOYD M YAGER**

Mailing Address 1610 BIRCH LANE

City State Zip Code  
PARK RIDGE IL 60068

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-AP-Chief Data Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1608.72

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

**Transaction ID : A2013-4572483**

Amount of Each Receipt this Period

62.31

Full Name (Last, First, Middle Initial)

**B. PHILLIP C YOUNG**

Mailing Address 2181 APPLE HILL LANE

City State Zip Code  
BUFFALO GROVE IL 60089

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Director of Flight Operat

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

542.86

Date of Receipt

M M / D D / Y Y Y Y Y  
12 13 2013

**Transaction ID : A2013-4523736**

Amount of Each Receipt this Period

21.79

Full Name (Last, First, Middle Initial)

**C. PHILLIP C YOUNG**

Mailing Address 2181 APPLE HILL LANE

City State Zip Code  
BUFFALO GROVE IL 60089

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Director of Flight Operat

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

564.65

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

**Transaction ID : A2013-4572460**

Amount of Each Receipt this Period

21.79

**SUBTOTAL** of Receipts This Page (optional)..... ►

105.89

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 196 OF 213

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. MARY E ZAGORSKI**

Mailing Address 2609 N PINE AVE

City State Zip Code  
ARLINGTON HEIGHTS IL 60004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

PMO Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1066.86

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523757**

Amount of Each Receipt this Period

42.77

Full Name (Last, First, Middle Initial)

**B. MARY E ZAGORSKI**

Mailing Address 2609 N PINE AVE

City State Zip Code  
ARLINGTON HEIGHTS IL 60004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

PMO Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1109.63

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 27 / 2013

**Transaction ID : A2013-4572481**

Amount of Each Receipt this Period

42.77

Full Name (Last, First, Middle Initial)

**C. PAUL K ZIGTERMAN**

Mailing Address 236 SOUTH RIVERSIDE DRIVE

City State Zip Code  
VILLA PARK IL 60181

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

526.25

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2013

**Transaction ID : A2013-4523802**

Amount of Each Receipt this Period

21.16

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

106.70

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 197 OF 213  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. PAUL K ZIGTERMAN**

Mailing Address 236 SOUTH RIVERSIDE DRIVE

City State Zip Code  
VILLA PARK IL 60181

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

547.41

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

**Transaction ID : A2013-4572526**

Amount of Each Receipt this Period

21.16

Full Name (Last, First, Middle Initial)

**B. GERALD L ZIMMERMAN JR**

Mailing Address 2584 Sutton Lane

City State Zip Code  
AURORA IL 60502

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1859.05

Date of Receipt

M M / D D / Y Y Y Y Y  
12 13 2013

**Transaction ID : A2013-4523824**

Amount of Each Receipt this Period

74.56

Full Name (Last, First, Middle Initial)

**C. GERALD L ZIMMERMAN JR**

Mailing Address 2584 Sutton Lane

City State Zip Code  
AURORA IL 60502

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1933.61

Date of Receipt

M M / D D / Y Y Y Y Y  
12 27 2013

**Transaction ID : A2013-4572548**

Amount of Each Receipt this Period

74.56

**SUBTOTAL** of Receipts This Page (optional)..... ►

170.28

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 198 OF 213  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. CARLA A ZUNIGA**

Mailing Address 2189 N. BEAVER CREEK DRIVE

City State Zip Code  
 VERNON HILLS IL 60061

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ATO-Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

954.27

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 13 2013

**Transaction ID : A2013-4523860**

Amount of Each Receipt this Period

47.35

Full Name (Last, First, Middle Initial)

**B. CARLA A ZUNIGA**

Mailing Address 2189 N. BEAVER CREEK DRIVE

City State Zip Code  
 VERNON HILLS IL 60061

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ATO-Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1001.62

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 27 2013

**Transaction ID : A2013-4572584**

Amount of Each Receipt this Period

47.35

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

94.70

**TOTAL** This Period (last page this line number only)..... ►

19906.22

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 199 OF 213

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. Fifth Third Bank**

Mailing Address 346 West Carol Lane

City	State	Zip Code
Elmhurst	IL	60062

Purpose of Disbursement  
Service Charge

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2013

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

State: District: Not Applicable

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		11		2013

**Transaction ID : B485068**

Amount of Each Disbursement this Period

107.51
--------

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

--

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

--

**SUBTOTAL** of Disbursements This Page (optional).....▶

107.51

**TOTAL** This Period (last page this line number only).....▶

107.51

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 200 OF 213

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. Citizens for Waters**

Mailing Address 3700 Wilshire Blvd. Ste.. 1050-b

City	State	Zip Code
Los Angeles	CA	90010

Purpose of Disbursement  
Contribution

Candidate Name

**Maxine Waters**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA District: 43

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		04		2013

**Transaction ID : B482834**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. Perlmutter for Congress**

Mailing Address 499 S. Capitol St. SE Suite 422

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement  
Contribution

Candidate Name

**Ed Perlmutter**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CO District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		04		2013

**Transaction ID : B482836**

Amount of Each Disbursement this Period

500.00
--------

Full Name (Last, First, Middle Initial)

**C. The Freedom Fund**

Mailing Address 25 East Masonic View Avenue

City	State	Zip Code
Alexandria	VA	22301

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2013  
☐ Primary ☐ General  
☒ Other (specify) ▼  
Not Applicable

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2013

**Transaction ID : B483838**

Amount of Each Disbursement this Period

1000.00
---------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2500.00
---------

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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 201 OF 213

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. Friends of Dick Durbin**

Mailing Address 236 Massachusetts Ave. NE Suite 20

City	State	Zip Code
Washington	DC	20002

Purpose of Disbursement  
Contribution

Candidate Name

**Richard J Durbin**

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: IL District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		04		2013

**Transaction ID : B482837**

Amount of Each Disbursement this Period

2000.00
---------

Full Name (Last, First, Middle Initial)

**B. Hoyer's Majority Fund**

Mailing Address 499 South Capitol St. SW Suite 414

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2013
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼
Not Applicable

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		04		2013

**Transaction ID : B482833**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. Michael Grimm For Congress**

Mailing Address 104 Hume Avenue

City	State	Zip Code
Alexandria	VA	22301

Purpose of Disbursement  
Contribution

Candidate Name

**Michael Grimm**

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: NY District: 11

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2013

**Transaction ID : B483840**

Amount of Each Disbursement this Period

1000.00
---------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4000.00
---------

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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 202 OF 213

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. Wyden for Senate**

Mailing Address 3612 Newark Street NW

City Washington	State DC	Zip Code 20510
--------------------	-------------	-------------------

Purpose of Disbursement  
Contribution

011

Candidate Name

**Ron Wyden**Category/  
Type

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State: OR

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		04		2013

**Transaction ID : B482835**

Amount of Each Disbursement this Period

1500.00
---------

Full Name (Last, First, Middle Initial)

**B. Rock City PAC**

Mailing Address 1015 Stonebridge Park Drive

City Franklin	State TN	Zip Code 37069
------------------	-------------	-------------------

Purpose of Disbursement  
Contribution

011

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2012

☐ Primary ☐ General  
☒ Other (specify) ▼

State:

District:

Not Applicable

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		26		2013

**Transaction ID : B444086**

Amount of Each Disbursement this Period

-1000.00
----------

Voided: Original check dated 11/14/2012

Full Name (Last, First, Middle Initial)

**C. PRO-AD PAC**

Mailing Address 2020 K Street NW Suite 660

City Washington	State DC	Zip Code 20006
--------------------	-------------	-------------------

Purpose of Disbursement  
Contribution

011

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2013

☐ Primary ☐ General  
☒ Other (specify) ▼

State:

District:

Not Applicable

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		18		2013

**Transaction ID : B483839**

Amount of Each Disbursement this Period

1000.00
---------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1500.00
---------

8000.00
---------



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 204 OF 213

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. Cowsert for Senate**

Mailing Address 236 Hamilton Road

City Athens	State GA	Zip Code 30606
----------------	-------------	-------------------

Purpose of Disbursement  
G-2012 State Senate 46 GA

011

Candidate Name

**Bill Cowsert**Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: GA District: 46

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		26		2013

**Transaction ID : B433130**

Amount of Each Disbursement this Period

-500.00
---------

Voided: Original check dated 08/08/2012

Full Name (Last, First, Middle Initial)

**B. Gary Forby Campaign Fund**

Mailing Address PO Box 966

City Benton	State IL	Zip Code 62812
----------------	-------------	-------------------

Purpose of Disbursement  
G-2012 State Senate 59 IL

011

Candidate Name

**Gary Forby**Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: IL District: 59

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		26		2013

**Transaction ID : B435024**

Amount of Each Disbursement this Period

-1000.00
----------

Voided: Original check dated 09/05/2012

Full Name (Last, First, Middle Initial)

**C. Cmte for Frank J. Mautino**

Mailing Address PO Box 36

City Spring Valley	State IL	Zip Code 61362
-----------------------	-------------	-------------------

Purpose of Disbursement  
G-2012 State House 76 IL

011

Candidate Name

**Frank J Mautino**Category/  
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: IL District: 76

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		26		2013

**Transaction ID : B435039**

Amount of Each Disbursement this Period

-1250.00
----------

Voided: Original check dated 09/05/2012

**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

-2750.00

<input type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input checked="" type="checkbox"/>	29	<input type="checkbox"/>	30b

Allstate Insurance Company PAC

### A. Citizens for Jo Ann Osmond

011

-1000.00

Voided: Original check dated 09/05/2012

### B. Videt Carmichael Campaign

011

250.00

### C. Kelvin Buck Campaign

M M / D D / Y Y Y Y  
12 18 2013

011

-550.00

The diagram shows a rectangular frame with 12 vertical members and 2 horizontal members. A cross-section of a member is shown, indicating a rectangular shape with a central void.



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. Lynn Fitch Campaign**

Mailing Address P.O. Box 698

City Madison	State MS	Zip Code 39130
-----------------	-------------	-------------------

Purpose of Disbursement  
P-2015 State Treasurer MS

011

Candidate Name

**Lynn Fitch**Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

State: MS District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		18		2013

**Transaction ID : B483841**

Amount of Each Disbursement this Period

500.00
--------

Full Name (Last, First, Middle Initial)

**B. Mark Formby Campaign**

Mailing Address 911 Highway 43 North

City Picayune	State MS	Zip Code 39466
------------------	-------------	-------------------

Purpose of Disbursement  
P-2015 State House 108 MS

011

Candidate Name

**Mark Formby**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

State: MS District: 10

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		18		2013

**Transaction ID : B483842**

Amount of Each Disbursement this Period

200.00
--------

Full Name (Last, First, Middle Initial)

**C. Philip Gunn for Speaker of the House**

Mailing Address 101 Pinehaven Cove

City Clinton	State MS	Zip Code 39056
-----------------	-------------	-------------------

Purpose of Disbursement  
P-2015 State House 56 MS

011

Candidate Name

**Philip Gunn**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

State: MS District: 56

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		18		2013

**Transaction ID : B483844**

Amount of Each Disbursement this Period

500.00
--------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1200.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
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Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. Robert L. Johnson III Campaign**

Mailing Address 21 Vaughn Drive

City Natchez	State MS	Zip Code 39120
-----------------	-------------	-------------------

Purpose of Disbursement  
P-2015 State House 94 MS

011

Candidate Name

**Robert Johnson**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2015  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MS District: 94

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		18		2013

**Transaction ID : B483850**

Amount of Each Disbursement this Period

250.00
--------

Full Name (Last, First, Middle Initial)

**B. Dean Kirby Campaign**

Mailing Address PO Box 54099

City Pearl	State MS	Zip Code 39288
---------------	-------------	-------------------

Purpose of Disbursement  
P-2015 State Senate 30 MS

011

Candidate Name

**Dean Kirby**Category/  
TypeOffice Sought: ☐ House  
☒ Senate  
☐ PresidentDisbursement For: 2015  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MS District: 30

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		18		2013

**Transaction ID : B483848**

Amount of Each Disbursement this Period

200.00
--------

Full Name (Last, First, Middle Initial)

**C. Rita Potts Parks Campaign**

Mailing Address P.O. Box 303

City Corinth	State MS	Zip Code 38835
-----------------	-------------	-------------------

Purpose of Disbursement  
P-2015 State Senate 4 MS

011

Candidate Name

**Rita Parks**Category/  
TypeOffice Sought: ☐ House  
☒ Senate  
☐ PresidentDisbursement For: 2015  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MS District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		18		2013

**Transaction ID : B483853**

Amount of Each Disbursement this Period

200.00
--------

**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

650.00



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. Tate Reeves Campaign**

Mailing Address PO Box 24355

City Jackson	State MS	Zip Code 39225
-----------------	-------------	-------------------

Purpose of Disbursement  
P-2015 Lt. Governor MS

011

Candidate Name

**Tate Reeves**Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

State: MS District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		18		2013

**Transaction ID : B483847**

Amount of Each Disbursement this Period

500.00
--------

Full Name (Last, First, Middle Initial)

**B. Willie L. Simmons Campaign**

Mailing Address PO Box 297

City Cleveland	State MS	Zip Code 38732
-------------------	-------------	-------------------

Purpose of Disbursement  
P-2015 State Senate 13 MS

011

Candidate Name

**Willie L Simmons**Category/  
TypeOffice Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

State: MS District: 13

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		18		2013

**Transaction ID : B483852**

Amount of Each Disbursement this Period

250.00
--------

Full Name (Last, First, Middle Initial)

**C. Scott Reichner Campaign**

Mailing Address 78 Redtail Ridge

City Bigfork	State MT	Zip Code 59911
-----------------	-------------	-------------------

Purpose of Disbursement  
P-2012 State House 9 MT

011

Candidate Name

**Scott Reichner**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

State: MT District: 09

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		26		2013

**Transaction ID : B398318**

Amount of Each Disbursement this Period

-160.00
---------

Voided: Original check dated 11/03/2011

**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

590.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. Rep. Scott Reichner for HD 9**

Mailing Address 78 Redtail Ridge

City Bigfork	State MT	Zip Code 59911
-----------------	-------------	-------------------

Purpose of Disbursement  
G-2012 State House 9 MT

011

Candidate Name

**Scott Reichner**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MT District: 09

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		26		2013

**Transaction ID : B433123**

Amount of Each Disbursement this Period

-125.00
---------

Voided: Original check dated 08/08/2012

Full Name (Last, First, Middle Initial)

**B. Mike Hager Campaign Committee**

Mailing Address 342 Walking Horse Trail

City Rutherford	State NC	Zip Code 28139
--------------------	-------------	-------------------

Purpose of Disbursement  
P-2014 State House 112 NC

011

Candidate Name

**Michael Hager**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NC District: 11

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		04		2013

**Transaction ID : B482804**

Amount of Each Disbursement this Period

500.00
--------

Full Name (Last, First, Middle Initial)

**C. Tom Murry Campaign Committee**

Mailing Address P.O. Box 1054

City Morrisville	State NC	Zip Code 27560
---------------------	-------------	-------------------

Purpose of Disbursement  
P-2014 State House 41 NC

011

Candidate Name

**Thomas O Murry**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NC District: 41

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		04		2013

**Transaction ID : B482806**

Amount of Each Disbursement this Period

500.00
--------

**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

875.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. Garland Pierce Campaign Committee**

Mailing Address 21981 Buie Street

City Wagram	State NC	Zip Code 28396
----------------	-------------	-------------------

Purpose of Disbursement  
P-2014 State House 48 NC

Candidate Name

**Garland E Pierce**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NC District: 48

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		04		2013

**Transaction ID : B482807**

Amount of Each Disbursement this Period

500.00
--------

Full Name (Last, First, Middle Initial)

**B. Harry Warren Campaign Committee**

Mailing Address 201 Kingbridge Rd

City Salisbury	State NC	Zip Code 28144
-------------------	-------------	-------------------

Purpose of Disbursement  
P-2014 State House 77 NC

Candidate Name

**Harry J Warren**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NC District: 77

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		04		2013

**Transaction ID : B482805**

Amount of Each Disbursement this Period

500.00
--------

Full Name (Last, First, Middle Initial)

**C. Bobby Harrell Campaign Cmte.**

Mailing Address 8316 Rivers Ave.

City Charleston	State SC	Zip Code 29406
--------------------	-------------	-------------------

Purpose of Disbursement  
P-2012 State House 114 SC

Candidate Name

**Robert W Harrell Jr.**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: SC District: 11

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		26		2013

**Transaction ID : B400587**

Amount of Each Disbursement this Period

-1000.00
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Voided: Original check dated 11/30/2011

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. Estes for Senate**

Mailing Address P.O. Box 8287

City  
Wichita FallsState  
TXZip Code  
76307Purpose of Disbursement  
P-2014 State Senate 30 TX

011

Candidate Name

**Craig Estes**

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify) ▼

State: TX District: 30

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		30		2013

**Transaction ID : B484635**

Amount of Each Disbursement this Period

2000.00
---------

Full Name (Last, First, Middle Initial)

**B. Fraser for Texas Senate**

Mailing Address P.O. Box 13243

City  
AustinState  
TXZip Code  
78739Purpose of Disbursement  
P-2016 State Senate 24 TX

011

Candidate Name

**Troy Fraser**

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State: TX District: 24

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		30		2013

**Transaction ID : B484633**

Amount of Each Disbursement this Period

2000.00
---------

Full Name (Last, First, Middle Initial)

**C. John Smithee for State House Rep**

Mailing Address 320 Polk Street, Suite 1000

City  
AmarilloState  
TXZip Code  
79101Purpose of Disbursement  
P-2014 State House 86 TX

011

Candidate Name

**John T Smithee**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify) ▼

State: TX District: 86

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		30		2013

**Transaction ID : B484639**

Amount of Each Disbursement this Period

2000.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6000.00
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Allstate Insurance Company PAC**

Full Name (Last, First, Middle Initial)

**A. Kirk Watson Campaign**

Mailing Address P.O. Box 2004

City

Austin

State

TX

Zip Code

78768

Purpose of Disbursement

P-2014 State Senate 14 TX

011

Candidate Name

**Kirk Watson**Category/  
Type

Office Sought:

☐

House

☒

Senate

☐

President

Disbursement For: 2014

☒

Primary

☐

General

☐

Other (specify) ▼

State: TX

District: 14

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
12 / 30 / 2013D D / Y Y Y Y Y Y  
30 / 2013Y Y Y Y Y Y  
2013**Transaction ID : B484638**

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

**B. Thomas E. Lubnau for House**

Mailing Address 4 Cherokee Circle

City

Gillette

State

WY

Zip Code

82718

Purpose of Disbursement

P-2012 State House 31 WY

011

Candidate Name

**Thomas E Lubnau II**Category/  
Type

Office Sought:

☒

House

☐

Senate

☐

President

Disbursement For: 2012

☒

Primary

☐

General

☐

Other (specify) ▼

State: WY

District: 31

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
12 / 26 / 2013D D / Y Y Y Y Y Y  
26 / 2013Y Y Y Y Y Y  
2013**Transaction ID : B431902**

Amount of Each Disbursement this Period

-100.00

Voided: Original check dated 07/25/2012

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐

House

☐

Senate

☐

President

Disbursement For:

☐

Primary

☐

General

☐

Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

D D / Y Y Y Y Y Y

Y Y Y Y Y Y

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1900.00

8865.00